TEXAS HEALTH CARE INFORMATION COUNCIL

USER MANUAL

FOR

TEXAS HOSPITAL INPATIENT DISCHARGE
PUBLIC USE DATA FILE
2000

Users are advised to become familiar with the data limitations.

Users are advised to consider hospital comments in any analysis of the data.

BACKGROUND

The Texas Health Care Information Council (THCIC) was created by Chapter 108 of the Texas Health and Safety Code (THSC) and is responsible, under Sections 108.011 through 108.0135, for collecting hospital discharge data from all state licensed hospitals except those that are statutorily exempt from the reporting requirement. Exempt hospitals include those located in a county with a population less than 35,000, or those located in a county with a population more than 35,000 and with fewer than 100 licensed hospital beds and not located in an area that is delineated as an urbanized area by the United States Bureau of the Census (Section 108.0025). Exempt hospitals also include hospitals that do not seek insurance payment or government reimbursement (Section 108.009).

PUBLIC USE DATA FILE (PUDF)

Section 108.011(a) and 108.012 of the THSC requires THCIC to provide public use data for computer-to-computer access. It also permits THCIC to charge the data requestor a standard fee for using the Public Use Data File (PUDF).

The PUDF contains patient-level information for inpatient hospital stays. These data are extracted from THCIC's Hospital Discharge Database (HDD). Data from 413 hospitals reporting for first quarter 2000, 406 reporting data for second quarter, 403 reporting data for third quarter, and 408 reporting data for 4th quarter have been released. Hospitals that failed to comply with the statutory and regulatory requirements to report have been or are being penalized financially, per Section 108.014.

The 2000 PUDF is available in a text file, in fixed length format, with data for each quarter on a separate CD. The first quarter file contains 653,842 records (468 MB), the second quarter file contains 626,320 records (448 MB), the third quarter file contains 646,061 records (462 MB), and the fourth quarter file contains 647,586 records (463 MB). It is recommended that the files be used on a personal computer with an Intel Pentium processor with a minimum of 64 MB RAM and a minimum of .5 GB free disk space for each quarter and additional free disk space for any subsets of the data the user chooses to create.

The PUDF is a text file and contains individual patient records in fixed length format. The logical record length is 750 bytes. The data must be imported into a software package. No software is included with the PUDF. It was tested with several software packages, including Microsoft Access, SAS, and SPSS.

THCIC has made the following data elements available beginning with the quarter indicated:
- County, available 3rd quarter 1999
- Public Health Region, available 3rd quarter 1999
- Source of Secondary Payment, Code 1 (Non-Standard), available 3rd quarter 2000
- Source of Secondary Payment, Code 2 (Standard), available 3rd quarter 2000
- Revenue Code–23 (Total Revenue Code), available 3rd quarter 2000
- Total charges (all revenue code charges), line 23, available 3rd quarter 2000
- Non-covered Charges (all non-covered revenue code charges), available 3rd quarter 2000
- Accommodation Charge, Private Room Charge Amount, available 3rd quarter 2000
- Accommodation Charge, Semi-Private Room Charge Amount, available 3rd quarter 2000

- Accommodation Charge, Ward Charge Amount, available 3rd quarter 2000
- Accommodation Charge, Intensive Care Unit Charge Amount, available 3rd quarter 2000
- Accommodation Charge, Coronary Care Unit Charge Amount, available 3rd quarter 2000
- Ancillary Service Charge, Other Charge Amount, available 3rd quarter 2000
- Ancillary Service Charge, Pharmacy Charge Amount, available 3rd quarter 2000
- Ancillary Service Charge, Medical/Surgical Supply Charge Amount, available 3rd quarter 2000
- Ancillary Service Charge, Durable Medical Equipment Charge Amount, available 3rd quarter 2000
- Ancillary Service Charge, Used Durable Medical Equipment Charge Amount, available 3rd quarter 2000
- Ancillary Service Charge, Physical Therapy Charge Amount, available 3rd quarter 2000
- Ancillary Service Charge, Occupational Therapy Charge Amount, available 3rd quarter 2000
- Ancillary Service Charge, Speech Pathology Charge Amount, available 3rd quarter 2000
- Ancillary Service Charge, Inhalation Therapy Charge Amount, available 3rd quarter 2000
- Ancillary Service Charge, Blood Charge Amount, available 3rd quarter 2000
- Ancillary Service Charge, Blood Administration Charge Amount, available 3rd quarter 2000
- Ancillary Service Charge, Operating Room Charge Amount, available 3rd quarter 2000
- Ancillary Service Charge, Lithotripsy Charge Amount, available 3rd quarter 2000
- Ancillary Service Charge, Cardiology Charge Amount, available 3rd quarter 2000
- Ancillary Service Charge, Anesthesia Charge Amount, available 3rd quarter 2000
- Ancillary Service Charge, Laboratory Charge Amount, available 3rd quarter 2000
- Ancillary Service Charge, Radiology Charge Amount, available 3rd quarter 2000
- Ancillary Service Charge, MRI Charge Amount, available 3rd quarter 2000
- Ancillary Service Charge, Outpatient Services Charge Amount, available 3rd quarter 2000
- Ancillary Service Charge, Emergency Room Charge Amount, available 3rd quarter 2000
- Ancillary Service Charge, Ambulance Charge Amount, available 3rd quarter 2000
- Ancillary Service Charge, Professional Fee Charge Amount, available 3rd quarter 2000
- Ancillary Service Charge, Organ Acquisition Charge Amount, available 3rd quarter 2000
- Ancillary Service Charge, ESRD Charge Amount, available 3rd quarter 2000
- Ancillary Service Charge, Clinic Visit Charge Amount, available 3rd quarter 2000
- Total Accommodations Charges, available 3rd quarter 2000
- Total Non-Covered Accommodations Charges, available 3rd quarter 2000
- Total Ancillary Charges, available 3rd quarter 2000
- Total Non-covered Ancillary Charges, available 3rd quarter 2000
- Attending Physician Uniform ID, available 1st quarter 2000
- Operating or other Physician Uniform ID, available 1st quarter 2000
- Certification Status, available third quarter 1999

DATA PROCESSING AND QUALITY

All reporting hospitals are required to submit discharged inpatient claims data on a quarterly basis, using the uniform bill (UB-92) format. The data are validated through a process of automated

auditing and verification. Each individual hospital is responsible for the accuracy and completeness of its data. Even so, each record is subjected by THCIC to a series of audits that check for consistency and conformity with the definitions stated in the data specification manual. Records failing an audit check are returned to the hospital for correction and resubmission. Following the correction process, THCIC uses valid claims data to build files of "encounters" where one encounter contains the final discharge and all related interim claims information for a patient. Then, each submitting hospital has an opportunity to review, to make additional corrections, and to certify the encounter data with or without comments. Finally, THCIC builds a final encounter file that includes all corrections submitted by the hospitals. The Council staff checks and adjusts for missing values and invalid codes in this file before the PUDF is generated. THCIC will not release encounters found to contain material errors, defined as invalid data in one or more of the following data element groupings: dates, diagnosis codes, and procedure codes. Uniform physician identifiers are included beginning with first quarter 2000 data; hospital charges and secondary payors are available with third quarter 2000 data. Admission source for newborns is not included in this release of the PUDF. Users are advised to examine every data element to be used for missing values and invalid codes and to read accompanying notes, comments, and other descriptive text.

The Council has suppressed specific data elements for the following hospitals for some quarters because of concern for the quality of the data:

158000	University Hospital, *San Antonio*	race	Quarter 3
		surgical procedures, except principal	Quarter 4
511000	Doctors Hospital, *Dallas*	standard source of payment	Quarter 1
		non-standard source of payment	Quarter 1
549000	Baylor/Richardson Medical Center , *Richardson*	non-standard source of payment	Quarter 1, 2, 3, 4
665000	Central Texas Hospital, *Cameron*	race	Quarter 2, 3
698000	The Specialty Hospital of Houston , *Houston*	admission type	Quarter 1, 2, 3
698001	Specialty Hospital Houston–Clear Lake Campus, *Webster*	admission type	Quarter 1, 2, 3
796000	IHS Hospital of Amarillo, *Amarillo*	admission source	Quarter 1, 2, 3
		admission type	Quarter 1, 2, 3

PATIENT/PHYSICIAN CONFIDENTIALITY

The legislative intent behind the creation of the Hospital Discharge Database (HDD) was that the data and resulting information be used for the benefit of the public. This is specified in Section 108.013 of the Texas Health and Safety Code (THSC). The THSC also stipulates that the Council may not release and a person or entity may not gain access to any data that could reasonably be expected to reveal the identity of a patient or physician. Any effort to determine the identity of any person violates the THSC. In addition, under Section 108.013(e) and (f) of the THSC, patient and/or physician information in the HDD cannot be used for discovery, subpoena, or other means of legal compulsion or in any civil, administrative, or criminal proceeding. Pursuant to the THSC, THCIC excludes all direct personal and demographic identifiers (e.g., name, address, social security number, patient identifiers, admission and discharge dates) from the PUDF that might lead to the identification of a specific patient.

To protect patient identities, the Council has suppressed these data elements in this release of the PUDF:
- The last two digits of the patient's ZIP code are suppressed if there are fewer than thirty patients included in the ZIP code.
- The entire ZIP code is suppressed if a hospital has fewer than fifty discharges in a quarter.

- The ZIP code is changed to '88888' for patients from states other than Texas and the adjacent states.
- The entire ZIP code and gender code are suppressed if the ICD-9-CM code indicates alcohol or drug use or an HIV diagnosis.
- The entire ZIP code and provider name are suppressed if a hospital has fewer than five discharges of a particular gender, including 'unknown'. The provider ID is changed to '999998'.
- Age is represented by 22 age group codes for the general patient population and 5 age group codes for the HIV and alcohol and drug use patient populations.
- Race is changed to 'Other' and ethnicity is suppressed if a hospital has fewer than ten discharges of a race.
- All facility type indicators are suppressed if a hospital has fewer than fifty discharges in a quarter and the provider ID is changed to '999999'.
- Data for hospitals opening or closing within the quarter are suppressed unless certified.

To protect physician identities, the THSC requires creation of a uniform identification number for physicians in practice. Uniform physician identifiers are available beginning first quarter 2000 except when the number of physicians represented in a DRG for a hospital do not exceed the minimum cell size of five.

It may be possible in rare instances, through complex analysis and with outside information, to ascertain from the PUDF the identity of individual patients. Considerable harm could result if this were done. PUDF users are required to complete the THCIC Hospital Discharge Data Use Agreement in the Application before shipment of the PUDF.

RESTRICTIONS ON DATA USE

Section 108.010(c) of the THSC prohibits THCIC from releasing provider quality reports until one year of data is available. Users of the PUDF are cautioned about using less than a year of data to make any hospital quality assumptions.

Sections 108.013(c)(1) and (2) and 108.013 (g) of the Texas Health and Safety Code (THSC) prohibit the Texas Health Care Information Council (THCIC) from releasing, and a person or entity from gaining access to, any data that could reveal the identity of a patient or the identity of a physician unless specifically authorized by the Act. Any effort to determine the identity of any person or to use the information for any purpose other than for analysis and aggregate statistical reporting violates the THSC and the Data Use Agreement. By virtue of the Agreement, the signer agrees that the data will not be used to identify an individual patient or physician. Because of these restrictions, under no circumstances will users of the data contact an individual patient or physician or hospital for the purpose of verifying information supplied in the THCIC Hospital Discharge Data sets. Any questions about the data must be referred to THCIC only. Data analysis assistance is not provided by THCIC. The data are protected by United States copyright laws and international treaty provisions.

In the Data Use Agreement, the purchaser and end-user of the data are referred to as the "licensee". To acquire the data the licensee must give the following assurances with respect to the use of THCIC Hospital Discharge Data sets:

- The licensee will not release nor permit others to release the individual patient records or any part of them to any person who is not a staff member of the organization (specified below), except with the written approval of THCIC;

- The licensee will not attempt to link nor permit others to attempt to link the hospital stay records of patients in this data set with personally identifiable records from any other source;

- The licensee will not release nor permit others to release any information that identifies persons, directly or indirectly;

- The licensee will not attempt to use nor permit others to use the data to learn the identity of any physician;

- The licensee will not nor permit others to copy, sell, rent, license, lease, loan, or otherwise grant access to the data covered by this Agreement to any other person or entity, unless approved in writing by THCIC;

- The licensee agrees to read the User Manual and to be cognizant of the limitations of the data;

- The licensee will use the following citation in any publication of information from this file:

  Texas Hospital Inpatient Discharge Public Use Data File, [quarter and year of data]. Texas Health Care Information Council, Austin, Texas. [date of publication];

- The licensee will indemnify, defend, and hold the THCIC, its members, employees, and the Council's contract vendors harmless from any and all claims and losses accruing to any person as a result of violation of this agreement; and

- The licensee will make no statement nor permit others to make statements indicating or suggesting that interpretations drawn from these data are those of THCIC.

The licensee understands that these assurances are collected by THCIC to assure compliance with its statutory confidentiality requirement. The signature on behalf of the licensee indicates the licensee's agreement to comply with the above-stated requirements with the knowledge that under Sections 108.014 and 108.0141 of the Texas Health and Safety Code to knowingly or negligently release data in violation of this agreement is punishable by a fine of up to $10,000 and an offense is a state jail felony. By signing the Data Use Agreement, the PUDF user has been informed that the potential for both civil and criminal penalties exists.
Users of report generating software to access the PUDF are required to purchase a license to use the data.

DATA LIMITATIONS
(Users are advised to become familiar with the data limitations.)

- The THSC requires that the uniform bill (UB-92) format be used for reporting purposes. Because this is a billing form, the data collected is administrative data and not clinical data.
- Hospital charges data are available third quarter 2000. Earlier data were not reported correctly by some hospitals.
- Secondary source of payment data are available third quarter 2000. Earlier data were not reported correctly by some hospitals.

- Gender is suppressed for patients with an ICD-9-CM code that indicates drug or alcohol use or an HIV diagnosis.
- The last two digits of the ZIP code are suppressed if there are thirty or fewer patients included in the zip code. All of the ZIP code is suppressed for patients with an ICD-9-CM code that indicates drug or alcohol use or an HIV diagnosis or if a hospital has fewer than five discharges of a particular gender, including 'unknown'. ZIP code is changed to '88888' for patients from a state other than Texas and not from an adjacent state. If ZIP is '88888' the state abbreviation is changed to 'ZZ'. ZIP code is suppressed if a hospital has fewer than five patients of a particular gender, including 'unknown'.
- Admission Source as reported by hospitals is suppressed, as recommended by the Council, when the Admission Type is 'newborn'. Data users can use ICD-9-CM codes to correctly identify the clinical status of newborns.
- Uniform identification numbers for physicians are available first quarter 2000 except for cases which do not exceed the minimum cell.
- Hospitals must submit data no later than 60 days after the close of a calendar quarter. Depending on hospitals' collection and billing cycles, not all discharges may have been billed or reported. This can affect the accuracy of source of payment data, particularly self-pay and charity that may later qualify for Medicaid or other payment sources.
- The number of diagnosis codes collected per patient is limited to 9 and the number of procedure codes to 6. Because of these limitations, sicker patients and the hospitals that treat them may not be accurately represented in the data. This may also result in total volume and percentage calculations for diagnoses and procedures not being complete.
- Race and ethnicity data are generally not collected by hospitals and may be subjectively captured.
- Some hospitals have stated that Discharge Status has been reported incorrectly. These inaccuracies are addressed in the hospitals' comments.
- County of residence is not collected by hospitals. County Federal Information Processing Standard (FIPS) codes are assigned by THCIC based on patient ZIP code.
- THCIC assigns the Risk of Mortality and Severity of Illness scores using methodology designed by 3M. These scores may be affected by the limited number of diagnoses and procedure codes collected by THCIC and may be understated.
- Comparability of length of stay (LOS) across hospitals is affected by factors such as case-mix and severity complexity, payer-mix, market areas and hospital ownership, affiliation or teaching status. Any analysis of LOS at the hospital level should consider the above factors.
- Length of stay is limited to 999 days.
- Any analysis of mortality should note that the data reflect only patients who died in the hospital and not those who died after discharge from the hospital.
- Conditions present at time of admission cannot be distinguished from those occurring during hospitalization.
- THCIC collects data from all hospitals in the state not specifically exempted by statute. This hospital mix should be considered when drawing conclusions about the data or making comparisons with other data.
- Any conclusions drawn from the data are subject to errors caused by the inability of the hospital to communicate complete data due to form constraints, subjectivity in the

assignment of codes, system mapping, and normal clerical error. The data are submitted by hospitals as their best effort to meet statutory requirements.

HOSPITAL COMMENTS
(Users are advised to consider hospital comments in any analysis of the data.)

Included with the PUDF is a separate file containing the unedited comments submitted by hospitals at the time of data certification. Comments relating to individual data elements should be considered in any analysis of those data elements. These comments express the opinions of individual hospitals and are not necessarily the views of the THCIC. Hospitals that submitted comments are identified in 'Reporting Status of Texas Hospitals'.

CITATION

Any statistical reporting or analysis based on the data shall cite the source as the following:

Texas Hospital Inpatient Discharge Public Use Data File, [quarter and year of data]. Texas Health Care Information Council, Austin, Texas. [date of publication].

Texas Health Care Information Council

Texas Hospital Inpatient Discharge
Public Use Data File

Data Dictionary

The purpose of this document is to provide the user with the necessary information to use and understand the data in the Public Use Data File. The following information is provided:

Number	Sequential order of data fields in the file
Field	Unique, abbreviated name of the data element
Name	Name of the data element
Description	Brief explanation of the data element. Descriptions of data elements from the UB-92 are taken from specifications manuals.
Data Source	Provided by the hospital on the UB-92 (UB-92)
	Provided by the Texas Department of Health (TDH)
	Additional field required by THCIC (Additional reporting requirement)
	Assigned by THCIC (Assigned)
	Calculated by THCIC (Calculated)
	Conversion of HCPCS and CPT codes to ICD-9 codes (Conversion from HCPCS or CPT)
	Assignment from 3M DRG Grouper (3M DRG Grouper)
	Note: For those data elements that have been suppressed, the quarter of data for which the data element will be released is noted following the Data Source.
Type	Alphanumeric or numeric
Coding scheme	Valid codes for a data field. Values taken from specifications manuals.

Any code provided by a hospital that is not valid has been assigned the value '*'.
Any data element that is blank should be interpreted as 'missing', no data provided, unless otherwise noted.
Data elements that are shaded are not available for this release. The quarter of data for which the data element will be released is noted following the Data Source.

Reference manuals are cited following the Data Dictionary.

Number: 1
Field: DISCHARGE
Name: **Discharge Quarter**
Description: Year and quarter of discharge. *yyyy*Q*n*.
Data Source: Assigned by THCIC
Beginning Position: 1
Length: 6
Type: Alphanumeric

Number: 2
Field: THCIC_ID
Name: **Provider ID**
Description: Unique identifier assigned to the provider by THCIC. Hospitals with fewer than 50 discharges have been aggregated into the Provider ID '999999'. If a hospital has fewer than 5 discharges of a particular gender, including 'unknown', Provider ID is '999998'.
Data Source: Assigned by THCIC
Beginning Position: 7

Length:	6
Type:	Alphanumeric

Number:	3
Field:	PROVIDER_NAME
Name:	**Hospital Name**
Description:	Hospital name provided by the hospital. Hospitals with fewer than 50 discharges (Provider ID equals '999999') are assigned the name 'Low Discharge Volume Hospital'. If a hospital has fewer than 5 discharges of a particular gender, including 'unknown', Hospital Name is blank.
Data Source:	UB-92
Beginning Position:	13
Length:	50
Type:	Alphanumeric

Number:	4
Field:	FAC_TEACHING_IND
Name:	**Teaching Facility Indicator**
Description:	Hospital facility type indicator provided by TDH Facility Licensing Division. Suppressed for hospitals with fewer than 50 discharges (Provider ID equals '999999').
Data Source:	TDH
Beginning Position:	63
Length:	1
Type:	Alphanumeric
Coding Scheme:	A Member, Council of Teaching Hospitals
	Y Teaching facility

Number:	5
Field:	FAC_PSYCH_IND
Name:	**Psychiatric Facility Indicator**
Description:	Hospital facility type indicator provided by TDH Facility Licensing Division. Suppressed for hospitals with fewer than 50 discharges (Provider ID equals '999999').
Data Source:	TDH
Beginning Position:	64
Length:	1
Type:	Alphanumeric

Number:	6
Field:	FAC_REHAB_IND
Name:	**Rehabilitation Facility Indicator**
Description:	Hospital facility type indicator provided by TDH Facility Licensing Division. Suppressed for hospitals with fewer than 50 discharges (Provider ID equals '999999').
Data Source:	TDH
Beginning Position:	65
Length:	1
Type:	Alphanumeric

Number:	7
Field:	FAC_ACUTE_CARE_IND
Name:	**Acute Care Facility Indicator**
Description:	Hospital facility type indicator provided by TDH Facility Licensing Division. Suppressed for hospitals with fewer than 50 discharges (Provider ID equals '999999').
Data Source:	TDH
Beginning Position:	66
Length:	1
Type:	Alphanumeric

Number:	8

Field: FAC_SNF_IND
Name: **Skilled Nursing Facility Indicator**
Description: Hospital facility type indicator provided by TDH Facility Licensing Division. Suppressed for
                     hospitals with fewer than 50 discharges (Provider ID equals '999999').
Data Source: TDH
Beginning Position: 67
Length: 1
Type: Alphanumeric

Number: 9
Field: FAC_OTHER_LTC_IND
Name: **Other Long Term Care Facility Indicator**
Description: Hospital facility type indicator provided by TDH Facility Licensing Division. Suppressed for
                     hospitals with fewer than 50 discharges (Provider ID equals '999999').
Data Source: TDH
Beginning Position: 68
Length: 1
Type: Alphanumeric

Number: 10
Field: FAC_PEDS_IND
Name: **Pediatric Facility Indicator**
Description: Hospital facility type indicator provided by TDH Facility Licensing Division. Suppressed for
                     hospitals with fewer than 50 discharges (Provider ID equals '999999').
Data Source: TDH
Beginning Position: 69
Length: 1
Type: Alphanumeric
Coding Scheme: C   Member, Council of Teaching Hospitals
                   Y   Teaching facility

Number: 11
Field: SPEC_UNIT
Name: **Specialty Unit Indicator**
Description: Hospital specialty unit(s) used by patient. Assignment based on Bill Type or Revenue Code. In order
                     by number of days in the unit.
Data Source: Assigned by THCIC
Beginning Position: 70
Length: 5
Type: Alphanumeric
Coding Scheme: C   Coronary Care Unit
                   D   Detoxification Unit
                   I   Intensive Care Unit
                   H   Hospice Unit
                   N   Nursery
                   B   Obstetric Unit
                   O   Oncology Unit
                   P   Pediatric Unit
                   Y   Psychiatric Unit
                   R   Rehabilitation Unit
                   U   Sub-acute Care Unit
                   S   Skilled Nursing Unit
             Blank   Acute Care

Number: 12
Field: ENCOUNTER_INDICATOR
Name: **Encounter Indicator**

Description: Indicates the number of claims included in the encounter
Data Source: Calculated
Beginning Position: 75
Length: 2
Type: Alphanumeric

Number: 13
Field: SEX_CODE
Name: **Patient Gender**
Description: Gender of the patient as recorded at date of admission or start of care. Code is not available if an ICD-9-CM code indicates drug or alcohol use or an HIV diagnosis. If a hospital has fewer than 5 patients of a particular gender, including unknown, Provider ID is '999998' and Hospital Name and Patient ZIP Code are blank for those patients.
Data Source: UB-92
Beginning Position: 77
Length: 1
Type: Alphanumeric
Coding Scheme: M   Male
                  F   Female
                  U   Unknown
                  *   Invalid

Number: 14
Field: TYPE_OF_ADMISSION
Name: **Type of Admission**
Description: Code indicating the type of admission
Data Source: UB-92
Beginning Position: 78
Length: 1
Type: Alphanumeric
Coding Scheme: 1   Emergency
                  2   Urgent
                  3   Elective
                  4   Newborn
                  9   Information not available
                  *   Invalid

Number: 15
Field: SOURCE_OF_ADMISSION
Name: **Source of Admission**
Description: Code indicating source of the admission
Data Source: UB-92; suppressed indefinitely (code is blank) if Type of Admission is 'Newborn', Code 4 .
Beginning Position: 79
Length: 1
Type: Alphanumeric
Coding Scheme: 1   Physician referral
                  2   Clinic referral
                  3   HMO referral
                  4   Transfer from a hospital
                  5   Transfer from a skilled nursing facility
                  6   Transfer from another health care facility
                  7   Emergency Room
                  8   Court/Law Enforcement
                  9   Information not available
                  0   Transfer from psychiatric, substance abuse, rehab hospital
                  A   Transfer from a critical access hospital

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Number: 16
Field: PAT_STATE
Name: **Patient Address, State**
Description: State of the patient's mailing address. Standard 2-character Postal Service abbreviation.
Data Source: UB-92
Beginning Position: 80
Length: 2
Type: Alphanumeric
Coding Scheme: AR   Arkansas
                   LA   Louisiana
                   NM   New Mexico
                   OK   Oklahoma
                   TX   Texas
                   ZZ   All other states and American Territories
                   FC   Foreign country
                   *   Invalid

Number: 17
Field: PAT_ZIP
Name: **Patient ZIP code**
Description: Patient's five-digit ZIP code. Last two digits are blank if a ZIP code has fewer than 30 discharges. If state equals 'ZZ', ZIP code equals '88888'. If state equals 'FC' (foreign country) ZIP code is blank. If ICD-9-CM indicates alcohol or drug use or an HIV diagnosis the ZIP code is blank. If a hospital has fewer than fifty discharges the ZIP code is blank. If a hospital has fewer than 5 discharges of a particular gender, including 'unknown', the ZIP Code is blank.
Data Source: UB-92
Beginning Position: 82
Length: 5
Type: Alphanumeric

Number: 18
Field: COUNTY
Name: **Patient County of Address**
Description: FIPS code of patient's county.
Data Source: Assigned; based on patient ZIP code
Beginning Position: 87
Length: 3
Type: Alphanumeric
Coding Scheme:

001 Anderson	017 Bailey	033 Borden	049 Brown
003 Andrews	019 Bandera	035 Bosque	051 Burleson
005 Angelina	021 Bastrop	037 Bowie	053 Burnet
007 Aransas	023 Baylor	039 Brazoria	055 Caldwell
009 Archer	025 Bee	041 Brazos	057 Calhoun
011 Armstrong	027 Bell	043 Brewster	059 Callahan
013 Atascosa	029 Bexar	045 Briscoe	061 Cameron
015 Austin	031 Blanco	047 Brooks	063 Camp

065 Carson	177 Gonzales	289 Leon	401 Rusk
067 Cass	179 Gray	291 Liberty	403 Sabine
069 Castro	181 Grayson	293 Limestone	405 San Augustine
071 Chambers	183 Gregg	295 Lipscomb	407 San Jacinto
073 Cherokee	185 Grimes	297 Live Oak	409 San Patricio
075 Childress	187 Guadalupe	299 Llano	411 San Saba
077 Clay	189 Hale	301 Loving	413 Schleicher
079 Cochran	191 Hall	303 Lubbock	415 Scurry
081 Coke	193 Hamilton	305 Lynn	417 Shackelford
083 Coleman	195 Hansford	307 McCulloch	419 Shelby
085 Collin	197 Hardeman	309 McLennan	421 Sherman
087 Collingsworth	199 Hardin	311 McMullen	423 Smith
089 Colorado	201 Harris	313 Madison	425 Somervell
091 Comal	203 Harrison	315 Marion	427 Starr
093 Comanche	205 Hartley	317 Martin	429 Stephens
095 Concho	207 Haskell	319 Mason	431 Sterling
097 Cooke	209 Hays	321 Matagorda	433 Stonewall
099 Coryell	211 Hemphill	323 Maverick	435 Sutton
101 Cottle	213 Henderson	325 Medina	437 Swisher
103 Crane	215 Hidalgo	327 Menard	439 Tarrant
105 Crockett	217 Hill	329 Midland	441 Taylor
107 Crosby	219 Hockley	331 Milam	443 Terrell
109 Culberson	221 Hood	333 Mills	445 Terry
111 Dallam	223 Hopkins	335 Mitchell	447 Throckmorton
113 Dallas	225 Houston	337 Montague	449 Titus
115 Dawson	227 Howard	339 Montgomery	451 Tom Green
117 Deaf Smith	229 Hudspeth	341 Moore	453 Travis
119 Delta	231 Hunt	343 Morris	455 Trinity
121 Denton	233 Hutchinson	345 Motley	457 Tyler
123 Dewitt	235 Irion	347 Nacogdoches	459 Upshur
125 Dickens	237 Jack	349 Navarro	461 Upton
127 Dimmit	239 Jackson	351 Newton	463 Uvalde
129 Donley	241 Jasper	353 Nolan	465 Val Verde
131 Duval	234 Jeff Davis	355 Nueces	467 Van Zandt
133 Eastland	245 Jefferson	357 Ochiltree	469 Victoria
135 Ector	247 Jim Hogg	359 Oldham	471 Walker
137 Edwards	249 Jim Wells	361 Orange	473 Waller
141 El Paso	251 Johnson	363 Palo Pinto	475 Ward
139 Ellis	253 Jones	365 Panola	477 Washington
143 Erath	255 Karnes	367 Parker	479 Webb
145 Falls	257 Kaufman	369 Parmer	481 Wharton
147 Fannin	259 Kendall	371 Pecos	483 Wheeler
149 Fayette	261 Kenedy	373 Polk	485 Wichita
151 Fisher	263 Kent	375 Potter	487 Wilbarger
153 Floyd	265 Kerr	377 Presidio	489 Willacy
155 Foard	267 Kimble	379 Rains	491 Williamson
157 Fort Bend	269 King	381 Randall	493 Wilson
159 Franklin	271 Kinney	383 Reagan	495 Winkler
161 Freestone	273 Kleberg	385 Real	497 Wise
163 Frio	275 Knox	387 Red River	499 Wood
165 Gaines	283 La Salle	389 Reeves	501 Yoakum
167 Galveston	277 Lamar	391 Refugio	503 Young
169 Garza	279 Lamb	393 Roberts	505 Zapata
171 Gillespie	281 Lampasas	395 Robertson	507 Zavala
173 Glasscock	285 Lavaca	397 Rockwall	
175 Goliad	287 Lee	399 Runnels	* Invalid

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Number: 19
Field: PUBLIC_HEALTH_REGION
Name: **Public Health Region of Patient Address**
Description: Public Health Region of Patient's address.
Data Source: Assigned; regions determined by Texas Department of Health
Beginning Position: 90
Length: 2
Type: Alphanumeric
Coding Scheme: 1   Armstrong, Bailey, Briscoe, Carson, Castro, Childress, Cochran, Collingsworth, Crosby, Dallam, Deaf Smith, Dickens, Donley, Floyd, Garza, Gray, Hale, Hall, Hansford, Hartley, Hemphill, Hockley, Hutchinson, King, Lamb, Lipscomb, Lubbock, Lynn, Moore, Motley, Ochiltree, Oldham, Parmer, Potter, Randall, Roberts, Sherman, Swisher, Terry, Wheeler, Yoakum counties
                   2   Archer, Baylor, Brown, Callahan, Clay, Coleman, Comanche, Cottle, Eastland, Fisher, Foard, Hardeman, Haskell, Jack, Jones, Kent, Knox, Mitchell, Montague, Nolan, Runnels, Scurry, Shackleford, Stephens, Stonewall, Taylor, Throckmorton, Wichita, Wilbarger, Young counties
                   3   Collin, Cooke, Dallas, Denton, Ellis, Erath, Fannin, Grayson, Hood, Hunt, Johnson, Kaufman, Navarro, Palo Pinto, Parker, Rockwall, Somervell, Tarrant, Wise counties
                   4   Anderson, Bowie, Camp, Cass, Cherokee, Delta, Franklin, Gregg, Harrison, Henderson, Hopkins, Lamar, Marion, Morris, Panola, Rains, Red River, Rusk, Smith, Titus, Upshur, Van Zandt, Wood counties
                   5   Angelina, Hardin, Houston, Jasper, Jefferson, Nacogdoches, Newton, Orange, Polk, Sabine, San Augustine, San Jacinto, Shelby, Trinity, Tyler counties
                   6   Austin, Brazoria, Chambers, Colorado, Fort Bend, Galveston, Harris, Liberty, Matagorda, Montgomery, Walker, Waller, Wharton counties
                   7   Bastrop, Bell, Blanco, Bosque, Brazos, Burleson, Burnet, Caldwell, Coryell, Falls, Fayette, Freestone, Grimes, Hamilton, Hays, Hill, Lampasas, Lee, Leon, Limestone, Llano, McLennan, Madison, Milam, Mills, Robertson, San Saba, Travis, Washington, Williamson counties
                   8   Atascosa, Bandera, Bexar, Calhoun, Comal, DeWitt, Dimmit, Edwards, Frio, Gillespie, Goliad, Gonzales, Guadalupe, Jackson, Karnes, Kendall, Kerr, Kinney, La Salle, Lavaca, Maverick, Medina, Real, Uvalde, Val Verde, Victoria, Wilson, Zavala counties
                   9   Andrews, Borden, Coke, Concho, Crane, Crockett, Dawson, Ector, Gaines, Glasscock, Howard, Irion, Kimble, Loving, McCulloch, Martin, Mason, Menard, Midland, Pecos, Reagan, Reeves, Schleicher, Sterling, Sutton, Terrell, Tom Green, Upton, Ward, Winkler counties
                   10   Brewster, Culberson, El Paso, Hudspeth, Jeff Davis, Presidio counties
                   11   Aransas, Bee, Brooks, Cameron, Duval, Hidalgo, Jim Hogg, Jim Wells, Kenedy, Kleberg, Live Oak, McMullen, Nueces, Refugio, San Patricio, Starr, Webb, Willacy, Zapata counties
                   *   Invalid

Number: 20
Field: ADMIT_WEEKDAY
Name: **Admission Day of Week**
Description: Code indicating day of week patient is admitted
Data Source: Calculated
Beginning Position: 92
Length: 1
Type: Alphanumeric
Coding Scheme: 1   Sunday
                   2   Monday
                   3   Tuesday
                   4   Wednesday
                   5   Thursday
                   6   Friday
                   7   Saturday
                   *   Invalid

Number:	21
Field:	LENGTH_OF_STAY
Name:	**Length of stay in days**
Description:	Length of stay *equals* Statement covers period through date *minus* Admission/start of care date. The minimum length of stay is 1 day. The maximum is 999 days. If length of stay is greater than 999 days, it is given as 999 days.
Data Source:	Calculated
Beginning Position:	93
Length:	3
Type:	Numeric

Number:	22
Field:	PAT_AGE
Name:	**Age of patient in years on date of discharge**
Description:	Code indicating age of patient in years.
Data Source:	Assigned
Beginning Position:	96
Length:	2
Type:	Alphanumeric

Coding Scheme:

00	1-28 days	11	40-44		*HIV and drug/alcohol use*
01	29-365 days	12	45-49		*patients:*
02	1-4 years	13	50-54	22	0-17
03	5-9	14	55-59	23	18-44
04	10-14	15	60-64	24	45-64
05	15-17	16	65-69	25	65-74
06	18-19	17	70-74	26	75+
07	20-24	18	75-79		
08	25-29	19	80-84	*	Invalid
09	30-34	20	85-89		
10	35-39	21	90+		

Number:	23
Field:	PAT_STATUS
Name:	**Patient Status**
Description:	Code indicating patient status as of the ending date of service for the period of care reported
Data Source:	UB-92
Beginning Position:	98
Length:	2
Type:	Alphanumeric

Coding Scheme:	01	Discharged to home or self-care (routine discharge)
	02	Discharged to other short term general hospital
	03	Discharged to skilled nursing facility
	04	Discharged to intermediate care facility
	05	Discharged to other inpatient care facility
	06	Discharged to care of home health service
	07	Left against medical advice
	08	Discharged to care of Home IV provider
	09	Admitted as inpatient to this hospital
	20	Expired
	30	Still patient
	40	Expired at home
	41	Expired in a medical facility
	42	Expired, place unknown
	50	Discharged to hospice–home
	51	Discharged to hospice–medical facility

61	Discharged/transferred within this institution to Medicare-approved swing bed
71	Discharged/transferred to other outpatient service
72	Discharged/transferred to institution outpatient
*	Invalid

Number: 24
Field: RACE
Name: **Patient Race**
Description: Code indicating the patient's race. If a hospital has fewer than ten patients of one race that race is changed to 'Other' (code equals 5).
Data Source: Additional reporting requirement
Beginning Position: 100
Length: 1
Type: Alphanumeric
Coding Scheme:
1	American Indian/Eskimo/Aleut
2	Asian or Pacific Islander
3	Black
4	White
5	Other
*	Invalid

Number: 25
Field: ETHNICITY
Name: **Patient Ethnicity**
Description: Code indicating the Hispanic origin of the patient. If a hospital has fewer than ten patients of one race the ethnicity of patients of that race is suppressed (code is blank).
Data Source: Additional reporting requirement
Beginning Position: 101
Length: 1
Type: Alphanumeric
Coding Scheme:
1	Hispanic Origin
2	Not of Hispanic Origin
*	Invalid

Number: 26
Field: PAYMENT_SOURCE_1
Name: **Non-Standard Source of Primary Payment**
Description: Code indicating non-standard source of the primary payment, coding scheme T-Z. Number 27 indicates standard source, coding scheme A-I, of the primary payment. Two additional fields, Number 29, standard source of payment, coding scheme A-I, and Number 28, non-standard source of payment, coding scheme T-Z, capture sources of the secondary payment.
Data Source: Additional reporting requirement
Beginning Position: 102
Length: 1
Type: Alphanumeric
Coding Scheme:
T	State or local government programs
U	Commercial PPO
V	Medicare Managed Care
X	Medicaid Managed Care
Y	Commercial HMO
Z	Charity Care
*	Invalid

Number: 27
Field: SOURCE_PAYMENT_CODE_1
Name: **Standard Source of Primary Payment**

Description: Code indicating standard source of the primary payment, coding scheme A-I. Number 26 indicates non-standard source, coding scheme T-Z, of the primary payment. Two additional fields, Number 29, standard source of payment, coding scheme A-I, and Number 28, non-standard source of payment, coding scheme T-Z, capture sources of the secondary payment.

Data Source: UB-92

Beginning Position: 103

Length: 1

Type: Alphanumeric

Coding Scheme: A   Self-Pay
                 B   Worker's Compensation
                 C   Medicare
                 D   Medicaid
                 E   Other federal program, including VA
                 F   Commercial
                 G   Blue Cross
                 H   CHAMPUS
                 I   Other
                 *   Invalid

Number: 28

Field: PAYMENT_SOURCE_2

Name: **Source of Secondary Payment, Code 1 (Non-Standard)**

Description: Code indicating non-standard source of a secondary payment, coding scheme T-Z. Number 29 captures standard source, coding scheme A-I, of a secondary payment. Two additional fields, Number 27, standard source of payment, coding scheme A-I, and Number 26, non-standard source of payment, coding scheme T-Z, capture sources of the primary payment.

Data Source: UB-92

Beginning Position: 104

Length: 1

Type: Alphanumeric

Coding Scheme: T   State or local government program
                 U   Commercial PPO
                 V   Medicare Managed Care
                 X   Medicaid Managed Care
                 Y   Commercial HMO
                 Z   Charity Care

Number: 29

Field: SOURCE_PAYMENT_CODE_2

Name: **Source of Secondary Payment, Code 2 (Standard)**

Description: Code indicating standard source of a secondary payment, coding scheme A-I. Number 28 captures non-standard source, coding scheme T-Z, of a secondary payment. Two additional fields, Number 27, standard source of payment, coding scheme A-I, and Number 26, non-standard source of payment, coding scheme T-Z, capture sources of the primary payment.

Data Source: UB-92

Beginning Position: 105

Length: 1

Type: Alphanumeric

Coding Scheme: A   Self-pay
                 B   Worker's Compensation
                 C   Medicare
                 D   Medicaid
                 E   Other federal program, including VA
                 F   Commercial
                 G   Blue Cross
                 H   CHAMPUS

I   Other

Number: 30
Field: TYPE_OF_BILL
Name: **Type of Bill**
Description: Provides specific information about the claim data submitted. First digit identifies the type of facility. Second digit classifies the type of care. Third digit indicates the sequence of the charges for a specific episode of care.
Data Source: UB-92
Beginning Position: 106
Length: 3
Type: Alphanumeric
Coding Scheme: *1st of 3 digits–Type of Facility*
                    1   Hospital
                    2   Skilled nursing
                    3   Home health
                    4   Religious non-medical health care–Hospital
                    5   Religious non-medical health care–Extended care
                    6   Intermediate care
                    7   Clinic
                    8   Special facility

2nd of 3 digits–Bill Classification (Except Clinics)
1   Inpatient, including Medicare Part A
2   Inpatient, Medicare Part B only
3   Outpatient
4   Outpatient Other, Medicare Part B only
5   Intermediate Care–Level I
6   Intermediate Care–Level II
7   Sub-acute inpatient – Level III
8   Swing bed

2nd of 3 digits–Bill Classification (Clinics Only)
1   Rural health (Medicare, if first digit is 7)
2   Renal Dialysis Center (Medicare, if first digit is 7)
3   Federally Qualified Health Center
4   Outpatient Rehabilitation Facility (ORF) (Medicare, if first digit is 7)
5   Comprehensive Outpatient Rehabilitation Facility (CORF) (Medicare, if first digit is 7)
6   Community Mental Health Center (Medicare, if first digit is 7)
9   Other

2nd of 3 digits–Bill Classification (Special Facilities)
1   Hospice (non-hospital based) (Medicare, if first digit is 8)
2   Hospice (hospital based) (Medicare, if first digit is 8)
3   Ambulatory surgery center (Medicare, if first digit is 8)
4   Free standing birthing center
5   Rural primary care hospital (Medicare, if first digit is 8)
9   Other

3rd of 3 digits–Frequency
0   Non-payment/Zero claim
1   Admit through discharge claim
2   Interim–first claim
3   Interim–continuing claim
4   Interim–last claim
5   Late charge(s) only claim
6   Adjustment of prior claim (Not used by Medicare)
7   Replacement of prior claim
8   Void/cancel of prior claim

```
                    *    Invalid
-------------------------------------------------------------------
Number:           31
Field:            REVENUE_CODE_23
Name:             Revenue Code–23 (Total Revenue Code)
Description:      Total revenue code, coded as 0001 from line 23
Data Source:      UB-92
Beginning Position: 109
Length:           4
Type:             Alphanumeric
-------------------------------------------------------------------
Number:           32
Field:            TOTAL_CHARGES_23
Name:             Total charges (all revenue code charges), line 23
Description:      Sum of total accommodation charges, total non-covered accommodation charges, total ancillary
                  charges, total non-covered ancillary charges
Data Source:      Calculated
Beginning Position: 113
Length:           12
Type:             Numeric
-------------------------------------------------------------------
Number:           33
Field:            NON_COV_CHARGES_23
Name:             Non-covered Charges (all non-covered revenue code charges)–23
Description:      Sum of total non-covered accommodation charges, total non-covered ancillary charges
Data Source:      Calculated
Beginning Position: 125
Length:           12
Type:             Numeric
-------------------------------------------------------------------
Number:           34
Field:            PRIVATE_AMOUNT
Name:             Accommodation Charge, Private Room Charge Amount
Description:      Calculated from MEDPAR. Sum of charges associated with revenue codes 11X, 14X.
Data Source:      Calculated
Beginning Position: 137
Length:           12
Type:             Numeric
-------------------------------------------------------------------
Number:           35
Field:            SEMI_PRIVATE_AMOUNT
Name:             Accommodation Charge, Semi-Private Room Charge Amount
Description:      Calculated from MEDPAR. Sum of charges associated with revenue codes 10X, 12X-13X, 16X-19X.
Data Source:      Calculated
Beginning Position: 149
Length:           12
Type:             Numeric
-------------------------------------------------------------------
Number:           36
Field:            WARD_AMOUNT
Name:             Accommodation Charge, Ward Charge Amount
Description:      Calculated from MEDPAR. Sum of charges associated with revenue codes 15X.
Data Source:      Calculated
Beginning Position: 161
Length:           12
Type:             Numeric
```

Number: 37
Field: ICU_AMOUNT
Name: **Accommodation Charge, Intensive Care Unit Charge Amount**
Description: Calculated from MEDPAR. Sum of charges associated with revenue codes 20X.
Data Source: Calculated
Beginning Position: 173
Length: 12
Type: Numeric

Number: 38
Field: CCU_AMOUNT
Name: **Accommodation Charge, Coronary Care Unit Charge Amount**
Description: Calculated from MEDPAR. Sum of charges associated with revenue codes 21X.
Data Source: Calculated
Beginning Position: 185
Length: 12
Type: Numeric

Number: 39
Field: OTHER_AMOUNT
Name: **Ancillary Service Charge, Other Charge Amount**
Description: Calculated from MEDPAR. Sum of charges associated with revenue codes 002-099, 22X-24X, 52X-53X, 55X-60X, 64X-70X, 76X-78X, 90X-95X, 99X.
Data Source: Calculated
Beginning Position: 197
Length: 12
Type: Numeric

Number: 40
Field: PHARM_AMOUNT
Name: **Ancillary Service Charge, Pharmacy Charge Amount**
Description: Calculated from MEDPAR. Sum of charges associated with revenue codes 25X, 26X, 63X.
Data Source: Calculated
Beginning Position: 209
Length: 12
Type: Numeric

Number: 41
Field: MEDSURG_AMOUNT
Name: **Ancillary Service Charge, Medical/Surgical Supply Charge Amount**
Description: Calculated from MEDPAR. Sum of charges associated with revenue codes 27X, 62X.
Data Source: Calculated
Beginning Position: 221
Length: 12
Type: Numeric

Number: 42
Field: DME_AMOUNT
Name: **Ancillary Service Charge, Durable Medical Equipment Charge Amount**
Description: Calculated from MEDPAR. Sum of charges associated with revenue codes 290-292, 294-299.
Data Source: Calculated
Beginning Position: 233
Length: 12
Type: Numeric

Number: 43
Field: USED_DME_AMOUNT
Name: **Ancillary Service Charge, Used Durable Medical Equipment Charge Amount**
Description: Calculated from MEDPAR. Sum of charges associated with revenue code 293.
Data Source: Calculated
Beginning Position: 245
Length: 12
Type: Numeric

Number: 44
Field: PT_AMOUNT
Name: **Ancillary Service Charge, Physical Therapy Charge Amount**
Description: Calculated from MEDPAR. Sum of charges associated with revenue codes 42X.
Data Source: Calculated
Beginning Position: 257
Length: 12
Type: Numeric

Number: 45
Field: OT_AMOUNT
Name: **Ancillary Service Charge, Occupational Therapy Charge Amount**
Description: Calculated from MEDPAR. Sum of charges associated with revenue codes 43X.
Data Source: Calculated
Beginning Position: 269
Length: 12
Type: Numeric

Number: 46
Field: SPEECH_AMOUNT
Name: **Ancillary Service Charge, Speech Pathology Charge Amount**
Description: Calculated from MEDPAR. Sum of charges associated with revenue codes 44X, 47X.
Data Source: Calculated
Beginning Position: 281
Length: 12
Type: Numeric

Number: 47
Field: IT_AMOUNT
Name: **Ancillary Service Charge, Inhalation Therapy Charge Amount**
Description: Calculated from MEDPAR. Sum of charges associated with revenue codes 41X, 46X.
Data Source: Calculated
Beginning Position: 293
Length: 12
Type: Numeric

Number: 48
Field: BLOOD_AMOUNT
Name: **Ancillary Service Charge, Blood Charge Amount**
Description: Calculated from MEDPAR. Sum of charges associated with revenue codes 38X.
Data Source: Calculated
Beginning Position: 305
Length: 12
Type: Numeric

Number: 49
Field: BLOOD_ADMIN_AMOUNT

Name: **Ancillary Service Charge, Blood Administration Charge Amount**
Description: Calculated from MEDPAR. Sum of charges associated with revenue codes 39X.
Data Source: Calculated
Beginning Position: 317
Length: 12
Type: Numeric

Number: 50
Field: OR_AMOUNT
Name: **Ancillary Service Charge, Operating Room Charge Amount**
Description: Calculated from MEDPAR. Sum of charges associated with revenue codes 36X, 71X-72X.
Data Source: Calculated
Beginning Position: 329
Length: 12
Type: Numeric

Number: 51
Field: LITH_AMOUNT
Name: **Ancillary Service Charge, Lithotripsy Charge Amount**
Description: Calculated from MEDPAR. Sum of charges associated with revenue codes 79X.
Data Source: Calculated
Beginning Position: 341
Length: 12
Type: Numeric

Number: 52
Field: CARD_AMOUNT
Name: **Ancillary Service Charge, Cardiology Charge Amount**
Description: Calculated from MEDPAR. Sum of charges associated with revenue codes 48X, 73X.
Data Source: Calculated
Beginning Position: 353
Length: 12
Type: Numeric

Number: 53
Field: ANES_AMOUNT
Name: **Ancillary Service Charge, Anesthesia Charge Amount**
Description: Calculated from MEDPAR. Sum of charges associated with revenue codes 37X.
Data Source: Calculated
Beginning Position: 365
Length: 12
Type: Numeric

Number: 54
Field: LAB_AMOUNT
Name: **Ancillary Service Charge, Laboratory Charge Amount**
Description: Calculated from MEDPAR. Sum of charges associated with revenue codes 30X-31X, 74X-75X.
Data Source: Calculated
Beginning Position: 377
Length: 12
Type: Numeric

Number: 55
Field: RAD_AMOUNT
Name: **Ancillary Service Charge, Radiology Charge Amount**
Description: Calculated from MEDPAR. Sum of charges associated with revenue codes 28X, 32X-35X, 40X.

Data Source: Calculated
Beginning Position: 389
Length: 12
Type: Numeric

Number: 56
Field: MRI_AMOUNT
Name: **Ancillary Service Charge, MRI Charge Amount**
Description: Calculated from MEDPAR. Sum of charges associated with revenue codes 61X.
Data Source: Calculated
Beginning Position: 401
Length: 12
Type: Numeric

Number: 57
Field: OP_AMOUNT
Name: **Ancillary Service Charge, Outpatient Services Charge Amount**
Description: Calculated from MEDPAR. Sum of charges associated with revenue codes 49X-50X.
Data Source: Calculated
Beginning Position: 413
Length: 12
Type: Numeric

Number: 58
Field: ER_AMOUNT
Name: **Ancillary Service Charge, Emergency Room Charge Amount**
Description: Calculated from MEDPAR. Sum of charges associated with revenue codes 45X.
Data Source: Calculated
Beginning Position: 425
Length: 12
Type: Numeric

Number: 59
Field: AMBULANCE_AMOUNT
Name: **Ancillary Service Charge, Ambulance Charge Amount**
Description: Calculated from MEDPAR. Sum of charges associated with revenue codes 54X.
Data Source: Calculated
Beginning Position: 437
Length: 12
Type: Numeric

Number: 60
Field: PRO_FEE_AMOUNT
Name: **Ancillary Service Charge, Professional Fee Charge Amount**
Description: Calculated from MEDPAR. Sum of charges associated with revenue codes 96X-98X.
Data Source: Calculated
Beginning Position: 449
Length: 12
Type: Numeric

Number: 61
Field: ORGAN_AMOUNT
Name: **Ancillary Service Charge, Organ Acquisition Charge Amount**
Description: Calculated from MEDPAR. Sum of charges associated with revenue codes 81X, 89X.
Data Source: Calculated
Beginning Position: 461

| Length: | 12 |
| Type: | Numeric |

Number:	62
Field:	ESRD_AMOUNT
Name:	**Ancillary Service Charge, ESRD Charge Amount**
Description:	Calculated from MEDPAR. Sum of charges associated with revenue codes 80X, 82X-88X.
Data Source:	Calculated
Beginning Position:	473
Length:	12
Type:	Numeric

Number:	63
Field:	CLINIC_AMOUNT
Name:	**Ancillary Service Charge, Clinic Visit Charge Amount**
Description:	Calculated from MEDPAR. Sum of charges associated with revenue codes 51X.
Data Source:	Calculated
Beginning Position:	485
Length:	12
Type:	Numeric

Number:	64
Field:	CLAIM_CHARGES_ACCOMM
Name:	**Total Accommodations Charges**
Description:	Total accommodations charges pertaining to revenue codes 0100-0219. Includes both covered and non-covered charges.
Data Source:	UB-92
Beginning Position:	497
Length:	12
Type:	Numeric

Number:	65
Field:	CLAIM_NON_COV_CHARGES_ACCOMM
Name:	**Total Non-Covered Accommodations Charges**
Description:	Total non-covered charges for the primary payer pertaining to revenue codes 0100-0219.
Data Source:	UB-92
Beginning Position:	509
Length:	12
Type:	Numeric

Number:	66
Field:	CLAIM_CHARGES_ANCIL
Name:	**Total Ancillary Charges**
Description:	Total ancillary charges pertaining to revenue codes other than 0100-0219. Includes both covered and non-covered charges.
Data Source:	UB-92
Beginning Position:	521
Length:	12
Type:	Numeric

Number:	67
Field:	CLAIM_NON_COV_CHARGES_ANCIL
Name:	**Total Non-covered Ancillary Charges**
Description:	Total non-covered ancillary charges for the primary payer pertaining to revenue codes other than 0100-0219.
Data Source:	UB-92

Beginning Position: 533
Length: 12
Type: Numeric

Number: 68
Field: ADMITTING_DIAG
Name: **Admitting Diagnosis**
Description: Full ICD-9-CM diagnosis code, including the 4th and 5th digits if applicable, that describes the admitting diagnosis as stated by the physician at the time of admission. A decimal is implied following the third character.
Data Source: UB-92
Beginning Position: 545
Length: 6
Type: Alphanumeric

Number: 69
Field: EXTNAL_CAUSE_OF_INJURY
Name: **External Cause of Injury (if applicable)**
Description: Full ICD-9-CM diagnosis code, including the 4th and 5th digits if applicable, that describes the admitting diagnosis, the condition established to be responsible for causing the hospitalization, if the cause is an external injury. A decimal is implied following the third character.
Data Source: UB-92
Beginning Position: 551
Length: 6
Type: Alphanumeric

Number: 70
Field: PRINC_DIAG_CODE
Name: **Principal Diagnosis Code**
Description: Full ICD-9-CM diagnosis code, including the 4th and 5th digits if applicable, that describes the principal diagnosis, the condition established to be responsible for causing the hospitalization or use of other hospital services. A decimal is implied following the third character.
Data Source: UB-92
Beginning Position: 557
Length: 6
Type: Alphanumeric

Number: 71
Field: OTH_DIAG_CODE_1
Name: **Other Diagnosis Code (1)**
Description: Full ICD-9-CM diagnosis code, including the 4th and 5th digits, if applicable, corresponding to the patient's additional conditions that coexist at the time of admission or develop subsequently and which have an effect on the treatment received or length of stay. A decimal is implied following the third character.
Data Source: UB-92
Beginning Position: 563
Length: 6
Type: Alphanumeric

Number: 72
Field: OTH_DIAG_CODE_2
Name: **Other Diagnosis Code (2)**
Description: Full ICD-9-CM diagnosis code, including the 4th and 5th digits, if applicable, corresponding to the patient's additional conditions that coexist at the time of admission or develop subsequently and which have an effect on the treatment received or length of stay. A decimal is implied following the third character.
Data Source: UB-92

Beginning Position: 569
Length: 6
Type: Alphanumeric

Number: 73
Field: OTH_DIAG_CODE_3
Name: **Other Diagnosis Code (3)**
Description: Full ICD-9-CM diagnosis code, including the 4th and 5th digits, if applicable, corresponding to the patient's additional conditions that coexist at the time of admission or develop subsequently and which have an effect on the treatment received or length of stay. A decimal is implied following the third character.
Data Source: UB-92
Beginning Position: 575
Length: 6
Type: Alphanumeric

Number: 74
Field: OTH_DIAG_CODE_4
Name: **Other Diagnosis Code (4)**
Description: Full ICD-9-CM diagnosis code, including the 4th and 5th digits, if applicable, corresponding to the patient's additional conditions that coexist at the time of admission or develop subsequently and which have an effect on the treatment received or length of stay. A decimal is implied following the third character.
Data Source: UB-92
Beginning Position: 581
Length: 6
Type: Alphanumeric

Number: 75
Field: OTH_DIAG_CODE_5
Name: **Other Diagnosis Code (5)**
Description: Full ICD-9-CM diagnosis code, including the 4th and 5th digits, if applicable, corresponding to the patient's additional conditions that coexist at the time of admission or develop subsequently and which have an effect on the treatment received or length of stay. A decimal is implied following the third character.
Data Source: UB-92
Beginning Position: 587
Length: 6
Type: Alphanumeric

Number: 76
Field: OTH_DIAG_CODE_6
Name: **Other Diagnosis Code (6)**
Description: Full ICD-9-CM diagnosis code, including the 4th and 5th digits, if applicable, corresponding to the patient's additional conditions that coexist at the time of admission or develop subsequently and which have an effect on the treatment received or length of stay. A decimal is implied following the third character.
Data Source: UB-92
Beginning Position: 593
Length: 6
Type: Alphanumeric

Number: 77
Field: OTH_DIAG_CODE_7
Name: **Other Diagnosis Code (7)**
Description: Full ICD-9-CM diagnosis code, including the 4th and 5th digits, if applicable, corresponding to the patient's additional conditions that coexist at the time of admission or develop subsequently and

which have an effect on the treatment received or length of stay. A decimal is implied following the third character.

Data Source:	UB-92
Beginning Position:	599
Length:	6
Type:	Alphanumeric

Number:	78
Field:	OTH_DIAG_CODE_8
Name:	**Other Diagnosis Code (8)**
Description:	Full ICD-9-CM diagnosis code, including the 4th and 5th digits, if applicable, corresponding to the patient's additional conditions that coexist at the time of admission or develop subsequently and which have an effect on the treatment received or length of stay. A decimal is implied following the third character.
Data Source:	UB-92
Beginning Position:	605
Length:	6
Type:	Alphanumeric

Number:	79
Field:	PRINC_SURG_PROC_CODE
Name:	**Principal Surgical Procedure Code (if applicable)**
Description:	Code for the principal surgical or obstetrical procedure performed during the period covered by the bill. ICD-9, HCPCS, or CPT code.
Data Source:	UB-92
Beginning Position:	611
Length:	7
Type:	Alphanumeric

Number:	80
Field:	PRINC_SURG_PROC_DAY
Name:	**Day Number of Principal Surgical Procedure**
Description:	Day number of principal surgical procedure *equals* Principal surgical procedure date *minus* Admission/Start of Care Date
Data Source:	Calculated
Beginning Position:	618
Length:	4
Type:	Numeric

Number:	81
Field:	PRINC_ICD9_CODE
Name:	**ICD–9 (Principal)**
Description:	ICD-9 Code converted from Principal Surgical Procedure Code if it was provided by hospital as HCPCS or CPT Code. If Principal Surgical Procedure Code was provided as ICD-9 code, this code is the same. A decimal is implied following the second character.
Data Source:	Conversion from HCPCS or CPT
Beginning Position:	622
Length:	5
Type:	Alphanumeric

Number:	82
Field:	OTH_SURG_PROC_CODE_1
Name:	**Other Procedure Code (1)**
Description:	Significant procedure, other than the principal procedure, important for the episode of care and closely related to the principal diagnosis. ICD-9, HCPCS, or CPT code.
Data Source:	UB-92
Beginning Position:	627

Length: 7
Type: Alphanumeric

Number: 83
Field: OTH_SURG_PROC_DAY_1
Name: **Day number of Other Surgical Procedure 1**
Description: Day number of other surgical procedure *equals* Procedure date *minus* Admission/Start of Care Date
Data Source: Calculated
Beginning Position: 634
Length: 4
Type: Alphanumeric

Number: 84
Field: OTH_ICD9_CODE_1
Name: **ICD–9 (1)**
Description: ICD-9 Code converted from Other Procedure Code (1) if it was provided by hospital as HCPCS or CPT Code. If Other Procedure Code (1) was provided as ICD-9 code, this code is the same. A decimal is implied following the second character.
Data Source: Conversion from HCPCS or CPT
Beginning Position: 638
Length: 5
Type: Alphanumeric

Number: 85
Field: OTH_SURG_PROC_CODE_2
Name: **Other Surgical Procedure Code 2**
Description: Significant procedure, other than the principal procedure, important for the episode of care and closely related to the principal diagnosis. ICD-9, HCPCS, or CPT code.
Data Source: UB-92
Beginning Position: 643
Length: 7
Type: Alphanumeric

Number: 86
Field: OTH_SURG_PROC_DAY_2
Name: **Day number of Other Surgical Procedure 2**
Description: Day number of other surgical procedure 2 *equals* Procedure date 2 *minus* Admission/Start of Care Date
Data Source: Calculated
Beginning Position: 650
Length: 4
Type: Alphanumeric

Number: 87
Field: OTH_ICD9_CODE_2
Name: **ICD–9 (2)**
Description: ICD-9 Code converted from Other Procedure Code (2) if it was provided by hospital as HCPCS or CPT Code. If Other Procedure Code (2) was provided as ICD-9 code, this code is the same. A decimal is implied following the second character.
Data Source: Conversion from HCPCS or CPT
Beginning Position: 654
Length: 5
Type: Numeric

Number: 88
Field: OTH_SURG_PROC_CODE_3
Name: **Other Surgical Procedure Code (3)**

Description: Significant procedure, other than the principal procedure, important for the episode of care and closely related to the principal diagnosis. ICD-9, HCPCS, or CPT code.
Data Source: UB-92
Beginning Position: 659
Length: 7
Type: Alphanumeric

Number: 89
Field: OTH_SURG_PROC_DAY_3
Name: **Day number of Other Surgical Procedure 3**
Description: Day number of other surgical procedure 3 *equals* Procedure date 3 *minus* Admission/Start of care date
Data Source: Calculated
Beginning Position: 666
Length: 4
Type: Alphanumeric

Number: 90
Field: OTH_ICD9_CODE_3
Name: **ICD–9 (3)**
Description: ICD-9 Code converted from Other Procedure Code (3) if it was provided by hospital as HCPCS or CPT Code. If Other Procedure Code (3) was provided as ICD-9 code, this code is the same. A decimal is implied following the second character.
Data Source: Conversion from HCPCS or CPT
Beginning Position: 670
Length: 5
Type: Alphanumeric

Number: 91
Field: OTH_SURG_PROC_CODE_4
Name: **Other Surgical Procedure Code 4**
Description: Significant procedure, other than the principal procedure, important for the episode of care and closely related to the principal diagnosis. ICD-9, HCPCS, or CPT code.
Data Source: UB-92
Beginning Position: 675
Length: 7
Type: Alphanumeric

Number: 92
Field: OTH_SURG_PROC_DAY_4
Name: **Day number of Other Surgical Procedure 4**
Description: Day number of other surgical procedure 4 *equals* Procedure date 4 *minus* Admission/Start of care date
Data Source: Calculated
Beginning Position: 682
Length: 4
Type: Alphanumeric

Number: 93
Field: OTH_ICD9_CODE_4
Name: **ICD–9 (4)**
Description: ICD-9 Code converted from Other Procedure Code (4) if it was provided by hospital as HCPCS or CPT Code. If Other Procedure Code (4) was provided as ICD-9 code, this code is the same. A decimal is implied following the second character.
Data Source: Conversion from HCPCS or CPT
Beginning Position: 686
Length: 5

Type:	Alphanumeric

Number:	94
Field:	OTH_SURG_PROC_CODE_5
Name:	**Other Surgical Procedure Code 5**
Description:	Significant procedure, other than the principal procedure, important for the episode of care and closely related to the principal diagnosis. ICD-9, HCPCS, or CPT code.
Data Source:	UB-92
Beginning Position:	691
Length:	7
Type:	Alphanumeric

Number:	95
Field:	OTH_SURG_PROC_DAY_5
Name:	**Day Number of Other Surgical Procedure 5**
Description:	Day number of other surgical procedure 5 *equals* Procedure date 5 *minus* Admission/Start of care date
Data Source:	Calculated
Beginning Position:	698
Length:	4
Type:	Alphanumeric

Number:	96
Field:	OTH_ICD9_CODE_5
Name:	**ICD–9 (5)**
Description:	ICD-9 Code converted from Other Procedure Code (5) if it was provided by hospital as HCPCS or CPT Code. If Other Procedure Code (5) was provided as ICD-9 code, this code is the same. A decimal is implied following the second character.
Data Source:	Conversion from HCPCS or CPT
Beginning Position:	702
Length:	5
Type:	Alphanumeric

Number:	97
Field:	MDC
Name:	**MDC Code**
Description:	Assignment of Major Diagnostic Category (MDC) from the 3M APR-DRG Grouper
Data Source:	3M DRG Grouper
Beginning Position:	707
Length:	2
Type:	Alphanumeric

Number:	98
Field:	HCFA_ DRG
Name:	**HCFA-DRG Code**
Description:	Assignment of Diagnosis Related Group (DRG) as assigned by Health Care Financing Administration (HCFA) for hospital payment for Medicare beneficiaries
Data Source:	3M DRG Grouper
Beginning Position:	709
Length:	3
Type:	Alphanumeric

Number:	99
Field:	APR_DRG
Name:	**APR-DRG Code**
Description:	Assignment of All Patient Refined (APR) Diagnosis Related Group (DRG) from the 3M APR-DRG Grouper
Data Source:	3M DRG Grouper

Beginning Position: 712
Length: 3
Type: Alphanumeric

Number: 100
Field: RISK_MORTALITY
Name: **Risk of Mortality Score**
Description: Assignment of a risk of mortality score from the All Patient Refined (APR) Diagnosis Related Group (DRG) from the 3M APR-DRG Grouper. Indicates the likelihood of dying.
Data Source: 3M DRG Grouper
Beginning Position: 715
Length: 1
Type: Alphanumeric
Coding Scheme: 1   Minor
2   Moderate
3   Major
4   Extreme
*   Invalid

Number: 101
Field: SEVERITY_ILLNESS
Name: **Severity of Illness Score**
Description: Assignment of a severity of illness score from the All Patient Refined (APR) Diagnosis Related Group (DRG) from the 3M APR-DRG Grouper. Indicates the extent of physiologic decompensation or organ system loss of function.
Data Source: 3M DRG Grouper
Beginning Position: 716
Length: 1
Type: Alphanumeric
Coding Scheme: 1   Minor
2   Moderate
3   Major
4   Extreme
*   Invalid

Number: 102
Field: ATTENDING_PHYSICIAN_UNIF_ID
Name: **Attending Physician Uniform Identifier**
Description: Unique identifier assigned to the licensed physician expected to certify medical necessity of services rendered, with primary responsibility for the patient's medical care and treatment. Physician is an individual licensed to practice medicine under the Medical Practice Act. Can include an individual other than a physician who admits patients to hospitals or who provides diagnostic or therapeutic procedures to inpatients, including psychologists, chiropractors, dentists, nurse practitioners, nurse midwives, and podiatrists authorized by the hospital to admit or treat patients. Suppressed when the number of physicians represented in a DRG for a hospital do not exceed the minimum cell size of five.
Data Source: Assigned by THCIC
Beginning Position: 717
Length: 16
Type: Alphanumeric
Coding Scheme: 9999999998   Cell size less than 5
9999999999   Temporary license or license number could not be matched

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Number: 103
Field: OPERATING_PHYSICIAN_ UNIF_ID
Name: **Operating or other Physician Uniform Identifier (if applicable)**

Description: Unique identifier assigned to the operating physician or physician other than the attending physician. Physician is an individual licensed to practice medicine under the Medical Practice Act. Can include an individual other than a physician who admits patients to hospitals or who provides diagnostic or therapeutic procedures to inpatients, including psychologists, chiropractors, dentists, nurse practitioners, nurse midwives, and podiatrists authorized by the hospital to admit or treat patients. Suppressed when the number of physicians represented in a DRG for a hospital do not exceed the minimum cell size of five.

Data Source: Assigned by THCIC

Beginning Position: 733

Length: 16

Type: Alphanumeric

Coding Scheme: 9999999998 Cell size less than 5

9999999999 Temporary license or license number could not be matched

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Number: 104

Field: CERT_STATUS

Name: **Certification Status**

Description: Assignment of a code to indicate the certification of data and submission of comments by the hospital. First available 3rd quarter 1999.

Data Source: Assigned

Beginning Position: 749

Length: 1

Type: Alphanumeric

Coding Scheme: 1   Certified, without comment

2   Certified, with comment

3   Certified, with comment, comment not received by deadline

4   Hospital elected not to certify

5   No response by deadline, THCIC comment

References:

There are currently three major versions of the Diagnosis Related Groups (DRGs) in use. The basic DRGs are used by the Health Care Financing Administration (HCFA) for hospital payment for Medicare beneficiaries. The All Patient DRGs (AP-DRGs) are an expansion of the basic DRGs to be more representative of non-Medicare populations such as pediatric patients. The All Patient Refined DRGs (APR-DRGs) incorporate severity of illness and risk or mortality subclasses into the AP-DRGs. The basic HCFA DRGs and the APR-DRGs are included in this data.

The reference for HCFA-DRGs is:
DRG Guidebook, 1999. St. Anthony Publishing, 1998.

The reference for APR-DRGs is:
*All Patient Refined Diagnosis Related Groups (APR-DRGs)***, Version 16.0. 3M Health Information Systems, 1998.**

Texas Health Care Information Council

Texas Hospital Inpatient Discharge
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Data Fields

Fields that are shaded are not available in this release of data.

NUMBER	FIELD NAME	POSITION	LENGTH	FIELD TYPE
1	DISCHARGE	1	6	Alphanumeric
2	THCIC_ID	7	6	Alphanumeric
3	PROVIDER_NAME	13	50	Alphanumeric
4	FAC_TEACHING_IND	63	1	Alphanumeric
5	FAC_PSYCH_IND	64	1	Alphanumeric
6	FAC_REHAB_IND	65	1	Alphanumeric
7	FAC_ACUTE_CARE_IND	66	1	Alphanumeric
8	FAC_SNF_IND	67	1	Alphanumeric
9	FAC_OTHER_LTC_IND	68	1	Alphanumeric
10	FAC_PEDS_IND	69	1	Alphanumeric
11	SPEC_UNIT	70	5	Alphanumeric
12	ENCOUNTER_INDICATOR	75	2	Alphanumeric
13	SEX_CODE	77	1	Alphanumeric
14	TYPE_OF_ADMISSION	78	1	Alphanumeric
15	SOURCE_OF_ADMISSION	79	1	Alphanumeric
16	PAT_STATE	80	2	Alphanumeric
17	PAT_ZIP	82	5	Alphanumeric
18	COUNTY	87	3	Alphanumeric
19	PUBLIC_HEALTH_REGION	90	2	Alphanumeric
20	ADMIT_WEEKDAY	92	1	Alphanumeric
21	LENGTH_OF_STAY	93	3	Numeric
22	PAT_AGE	96	2	Alphanumeric
23	PAT_STATUS	98	2	Alphanumeric
24	RACE	100	1	Alphanumeric
25	ETHNICITY	101	1	Alphanumeric
26	PAYMENT_SOURCE_1	102	1	Alphanumeric
27	SOURCE_PAYMENT_CODE_1	103	1	Alphanumeric
28	PAYMENT_SOURCE_2	104	1	Alphanumeric
29	SOURCE_PAYMENT_CODE_2	105	1	Alphanumeric
30	TYPE_OF_BILL	106	3	Alphanumeric
31	REVENUE_CODE_23	109	4	Alphanumeric
32	TOTAL_CHARGES_23	113	12	Numeric
33	NON-COV_CHARGES_23	125	12	Numeric
34	PRIVATE_AMOUNT	137	12	Numeric
35	SEMI_PRIVATE_AMOUNT	149	12	Numeric
36	WARD_AMOUNT	161	12	Numeric
37	ICU_AMOUNT	173	12	Numeric
38	CCU_AMOUNT	185	12	Numeric
39	OTHER_AMOUNT	197	12	Numeric
40	PHARM_AMOUNT	209	12	Numeric
41	MEDSURG_AMOUNT	221	12	Numeric
42	DME_AMOUNT	233	12	Numeric
43	USED_DME_AMOUNT	245	12	Numeric
44	PT_AMOUNT	257	12	Numeric
45	OT_AMOUNT	269	12	Numeric

46	SPEECH_AMOUNT	281	12	Numeric
47	IT_AMOUNT	293	12	Numeric
48	BLOOD_AMOUNT	305	12	Numeric
49	BLOOD_ADMIN_AMOUNT	317	12	Numeric
50	OR_AMOUNT	329	12	Numeric
51	LITH_AMOUNT	341	12	Numeric
52	CARD_AMOUNT	353	12	Numeric
53	ANES_AMOUNT	365	12	Numeric
54	LAB_AMOUNT	377	12	Numeric
55	RAD_AMOUNT	389	12	Numeric
56	MRI_AMOUNT	401	12	Numeric
57	OP_AMOUNT	413	12	Numeric
58	ER_AMOUNT	425	12	Numeric
59	AMBULANCE_AMOUNT	437	12	Numeric
60	PRO_FEE_AMOUNT	449	12	Numeric
61	ORGAN_AMOUNT	461	12	Numeric
62	ESRD_AMOUNT	473	12	Numeric
63	CLINIC_AMOUNT	485	12	Numeric
64	CLAIM_CHARGES_ACCOMM	497	12	Numeric
65	CLAIM_NON_COV_CHARGES_ACCOMM	509	12	Numeric
66	CLAIM_CHARGES_ANCIL	521	12	Numeric
67	CLAIM_NON_COV_CHARGES_ANCIL	533	12	Numeric
68	ADMITTING_DIAG	545	6	Alphanumeric
69	EXTNAL_CAUSE_OF_INJURY	551	6	Alphanumeric
70	PRINC_DIAG_CODE	557	6	Alphanumeric
71	OTH_DIAG_CODE_1	563	6	Alphanumeric
72	OTH_DIAG_CODE_2	569	6	Alphanumeric
73	OTH_DIAG_CODE_3	575	6	Alphanumeric
74	OTH_DIAG_CODE_4	581	6	Alphanumeric
75	OTH_DIAG_CODE_5	587	6	Alphanumeric
76	OTH_DIAG_CODE_6	593	6	Alphanumeric
77	OTH_DIAG_CODE_7	599	6	Alphanumeric
78	OTH_DIAG_CODE_8	605	6	Alphanumeric
79	PRINC_SURG_PROC_CODE	611	7	Alphanumeric
80	PRINC_SURG_PROC_DAY	618	4	Numeric
81	PRINC_ICD9_CODE	622	5	Alphanumeric
82	OTH_SURG_PROC_CODE_1	627	7	Alphanumeric
83	OTH_SURG_PROC_DAY_1	634	4	Numeric
84	OTH_ICD9_CODE_1	638	5	Alphanumeric
85	OTH_SURG_PROC_CODE_2	643	7	Alphanumeric
86	OTH_SURG_PROC_DAY_2	650	4	Numeric
87	OTH_ICD9_CODE_2	654	5	Alphanumeric
88	OTH_SURG_PROC_CODE_3	659	7	Alphanumeric
89	OTH_SURG_PROC_DAY_3	666	4	Numeric
90	OTH_ICD9_CODE_3	670	5	Alphanumeric
91	OTH_SURG_PROC_CODE_4	675	7	Alphanumeric
92	OTH_SURG_PROC_DAY_4	682	4	Numeric
93	OTH_ICD9_CODE_4	686	5	Alphanumeric
94	OTH_SURG_PROC_CODE_5	691	7	Alphanumeric
95	OTH_SURG_PROC_DAY_5	698	4	Numeric
96	OTH_ICD9_CODE_5	702	5	Alphanumeric
97	MDC	707	2	Alphanumeric
98	HCFA_DRG	709	3	Alphanumeric
99	APR_DRG	712	3	Alphanumeric
100	RISK_MORTALITY	715	1	Alphanumeric
101	SEVERITY_ILLNESS	716	1	Alphanumeric
102	ATTENDING_PHYSICIAN_UNIF_ID	717	16	Alphanumeric
103	OPERATING_PHYSICIAN_UNIF_ID	733	16	Alphanumeric
104	CERT_STATUS	749	1	Alphanumeric

Texas Hospital Inpatient Discharge Data
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Reporting Status of Texas Hospitals, 2000

	Reports With	00Q1	With Comment	00Q2	With Comment	00Q3	With Comment	00Q4	With Comment
Abilene									
091000 Abilene Regional Medical Center		x		x		x		x	
500000 Hendrick Medical Center		x		x		x		x	
688000 Hendrick Center for Extended Care		x^{lv}		x		x^{lv}		x^{lv}	
Alice									
353000 Alice Regional Hospital		x		x		x		x	
689400 CHRISTUS Spohn Hospital Alice		x		x		x		x	
Alpine									
711900 Big Bend Regional Medical Center		x		x		x		x	
Alvin									
212001 Alvin Diagnostic and Urgent Care Center	212000								
Amarillo									
001000 Baptist St. Anthony's Health System–Baptist Campus		x		x		x		x	
318000 Northwest Texas Hospital		x		x		x		x	
318001 The Pavilion	318000								
344000 Baptist St. Anthony's Health System–St. Anthony Campus		x		x		x		x	
707000 Quest Hospital		x		x		x			
714000 Northwest Texas Surgery Center		***		***		***		***	
785001 BSA Panhandle Surgery						x^{lv}		x	
796000 IHS Hospital of Amarillo		x	x	x	x	x	x	x	x
818000 SCCI Hospital of Amarillo		x		x		x		x^{lv}	
Anahuac									
442000 Bayside Community Hospital		*		*		*		*	
Andrews									
187000 Permian General Hospital		*		*		*		*	
Angleton									
126000 Angleton–Danbury General Hospital		*		*		*		*	
Anson									
016000 Anson General Hospital		*		*		*		*	
Aransas Pass									
239000 North Bay Hospital		x		x		x		x	
Arlington									
422000 Arlington Memorial Hospital		x	x	x	x	x	x	x	x
422001 Arlington Memorial South Medical Center	422000								
502000 Medical Center of Arlington		x	x	x		x		x	
660000 HEALTHSOUTH Rehab Hospital of Arlington		x		x		x		x	
690000 Kindred Hospital–Tarrant County–Arlington Campus		x		x		x		x	
765000 Millwood Hospital		x							
765001 Millwood Hospital				x	x	x	x	x	x
Aspermont									
666000 Stonewall Memorial Hospital		*		*		*		*	
Athens									
374000 East Texas Medical Center Athens		x		x		x		x	
Atlanta									

	Reports With	00Q1	With Comment	00Q2	With Comment	00Q3	With Comment	00Q4	With Comment
092000 Brooks Hospital		*		*		*		*	
131000 Atlanta Memorial Hospital		*		*		*		*	
Austin									
000100 Austin State Hospital		x	x	x	x	x	x	x	x
035000 St. David's Hospital		x		x		x		x	
335000 Daughters of Charity Brackenridge		x	x	x	x	x	x	x	x
335001 Daughters of Charity Childrens Hospital of Austin		x	x	x	x	x	x	x	x
497000 Daughters of Charity Seton Medical Center		x	x	x	x	x	x	x	x
497002 Daughters of Charity Seton Northwest		x	x	x	x	x	x	x	x
602000 South Austin Hospital		x	x	x	x	x	x	x	x
622000 The Brown Schools Rehab Center		x	x	x		x		x	
649000 St. David's Rehabilitation Center		x		x		x		x	
663000 HEALTHSOUTH Rehab Hospital of Austin		x		x		x		x	
700000 The Specialty Hospital of Austin		x	x	x		x		x	
700001 The Specialty Hospital of Austin at North Austin Medical Ctr		x	x	x		x		x	
700002 The Specialty Hospital of Austin at St David's Medical Center		x	x	x		x		x	
727000 The Oaks Treatment Center		x^{lv}	x	x^{lv}	x	x^{lv}	x	x^{lv}	x
739000 Healthcare Rehabilitation Center		x^{lv}	x	x^{lv}		x^{lv}		x^{lv}	
764000 Charter Behavioral Health System of Austin closed		x^{lv}							
770000 Daughters of Charity Seton Shoal Creek		x		x		x		x	
771000 St. David's Pavilion		x		x		x		x	
794000 HEALTHSOUTH Surgical Hospital of Austin		x		x^{lv}		x^{lv}		x^{lv}	
797000 North Austin Medical Center		x	x	x	x	x	x	x	x
798000 Summit Hospital of Central Texas		x	x	x		x		x	
817000 Renaissance Women's Center of Austin		x		x		x		x	
829000 Heart Hospital of Austin		x	x	x	x	x		x	
Azle									
469000 Harris Methodist Northwest		x	x	x	x	x	x	x	x
Ballinger									
234000 Ballinger Memorial Hospital District		*		*		*		*	
Bay City									
006000 Matagorda General Hospital		x		x	x	x	x	x	x
006001 Matagorda General Hospital		x		x	x	x	x	x	x
Baytown									
225000 BayCoast Medical Center		x		x		x		x	
405000 San Jacinto Methodist Hospital		x		x		x		x	
405001 San Jacinto Methodist Hospital	405000								
Beaumont									
057002 Fannin Behavioral Health Center	057000								
389000 Memorial Hermann Baptist Beaumont Hospital		x	x	x	x	x	x	x	x
389001 Baptist Hospital of Southeast Texas–East Campus	389000								
389002 Fannin Behavioral Health Center	389000								
444000 CHRISTUS St. Elizabeth Hospital		x	x	x	x	x	x	x	x
500400 Spindletop Mental Health and Mental Retardation Center		*		*		*		*	
671000 HEALTHSOUTH Rehab Hospital of Beaumont		x		x		x		x	
708000 Dubuis Hospital of Beaumont		x	x	x	x	x	x	x	x
Bedford									
182000 Harris Methodist H.E.B.		x	x	x	x	x	x	x	x
182001 Harris Methodist H.E.B.	182000								
778000 Harris Methodist Springwood		x	x	x	x	x	x	x	x
780000 Harris Continued Care Hospital–H.E.B.		x^{lv}	x	x^{lv}					
Beeville									
429000 CHRISTUS Spohn Hospital Beeville		x	x	x		x	x	x	x

	Reports With	00Q1	With Comment	00Q2	With Comment	00Q3	With Comment	00Q4	With Comment
Bellville									
552000 Bellville General Hospital		*		*		*		*	
Belton									
806001 Cedar Crest Hospital		x		x		x		x	
Big Lake									
343000 Reagan Memorial Hospital		*		*		*		*	
Big Spring									
000101 Big Spring State Hospital		x	x	x	x	x	x	x	x
221000 Scenic Mountain Medical Center		x		x		x		x	
Bonham									
106000 Northeast Medical Center		x	x	x	x	x	x	x	x
Borger									
654000 Golden Plains Community Hospital		*		*		*		*	
Bowie									
440000 Bowie Memorial Hospital		*		*		*		*	
Brady									
362000 Heart of Texas Memorial Hospital		*		*		*		*	
Breckenridge									
430000 Stephens Memorial Hospital		*		*		*		*	
Brenham									
066000 Trinity Community Medical Center of Brenham		*		*		*		*	
Brownfield									
078000 Brownfield Regional Medical Center		*		*		*		*	
Brownsville									
019000 Valley Regional Medical Center		x		x		x		x	
314000 Brownsville Medical Center		x		x		x		x	
Brownwood									
058000 Brownwood Regional Medical Center		x		x		x		x	
Bryan									
002001 St Joseph Regional Health Center		x	x	x	x	x	x	x	x
002002 St Joseph Regional Rehabilitation Center	002001								
717500 The Physicians Centre				x[lv]	x[N]	x	x[N]	x	x
Burnet									
559000 Daughters of Charity Seton Highland Lakes		x		x		x		x	
Caldwell									
679000 Burleson St Joseph Health Center of Caldwell		x	x	x	x	x	x	x	x
Cameron									
665000 Central Texas Hospital		x		x	x	x	x	x	
Canadian									
457000 Hemphill County Hospital		*		*		*		*	
Carrizo Springs									
156000 Dimmit County Memorial Hospital		*		*		*		*	
Carrollton									
042000 Trinity Medical Center		x	x	x	x	x	x	x	x
Carthage									
484000 East Texas Medical Center–Carthage		x		x		x		x	
Center									
423000 Memorial Hospital of Center		x	x	x		x	x		
423001 Shelby Regional Medical Center								x	x
Channelview									
455000 Columbia East Houston Medical Center–Beltway Campus	458000								
720400 Triumph Hospital East Houston						x[lv]		x[lv]	
Childress									

	Reports With	00Q1	With Comment	00Q2	With Comment	00Q3	With Comment	00Q4	With Comment
026000 Childress Regional Medical Center		*		*		*		*	
Chillicothe									
523000 Chillicothe Hospital		*		*		*		*	
Clarksville									
292000 East Texas Medical Center–Clarksville		x		x		x		x	
Cleburne									
323000 Walls Regional Hospital		x	x	x	x	x	x	x	x
Cleveland									
108000 Cleveland Regional Medical Center		x		x	x	x		x	
Clifton									
070000 Goodall-Witcher Healthcare Foundation		*		*		*		*	
Coleman									
049000 Coleman County Medical Center		*		*		*		*	
College Station									
071000 College Station Medical Center		x	x	x	x	x	x	x	x
Colorado City									
075000 Mitchell County Hospital		*		*		*		*	
Columbus									
014000 Columbus Community Hospital		*		*		*		*	
Comanche									
495000 Comanche Community Hospital		*		*		*		*	
Commerce									
087000 Presbyterian Hospital of Commerce		x		x		x		x	
Conroe									
508000 Conroe Regional Medical Center		x	x	x	x	x	x	x	x
695000 HEALTHSOUTH Rehab Hospital North Houston		x	x	x	x	x	x	x	x
Corpus Christi									
338000 CHRISTUS Spohn Hospital Shoreline		x		x		x		x	
398000 CHRISTUS Spohn Memorial Hospital		x	x	x	x	x	x	x	x
404000 Northwest Regional Hospital		x		x		x		x	
488000 Driscoll Children's Hospital		x		x		x		x	
488001 Driscoll Children's Hosp Neonatal Nursery at CHRISTUS Spohn				x^{lv}		x^{lv}		x^{lv}	
687000 Warm Springs Rehabilitation Hospital Corpus Christi		x		x		x^{lv}		x	
699000 IHS Hospital at Corpus Christi		x	x	x		x		x	
703000 The Corpus Christi Medical Center—Bay Area								x	x
703001 The Corpus Christi Medical Center–Bayview	703002								
703002 The Corpus Christi Medical Center–Doctors Regional		x	x	x	x	x	x	x	x
703003 The Corpus Christi Medical Center–The Heart Hospital								x	x
760000 Charter Behavioral Health System of Corpus Christi closed		x^{lv}							
826000 CHRISTUS Spohn Hospital South		x		x		x		x	
Corsicana									
141000 Navarro Regional Hospital		x	x	x	x	x	x	x	x
Crane									
467000 Crane Memorial Hospital		*		*		*		*	
Crockett									
185000 East Texas Medical Center–Crockett		x		x		x		x	
Crosbyton									
176000 Crosbyton Clinic Hospital		*		*		*		*	
Cuero									
074000 Cuero Community Hospital		*		*		*		*	
Dalhart									
262000 Coon Memorial Hospital & Home		*		*		*		*	

	Reports With	00Q1	With Comment	00Q2	With Comment	00Q3	With Comment	00Q4	With Comment
Dallas									
008000 Mary Shiels Hospital		x		x		x		x^{lv}	
008001 Mary Shiels Hospital								x	
028000 Kindred Hosptial Dallas		x	x	x	x	x	x	x	x
028001 Vencor Hospital–Dallas East		x	x	x	x	x	x		
054000 Texas Scottish Rite Hospital for Children		*		*		*		*	
096000 Dallas Southwest Medical Center		x		x		x		x	
142000 Margaret Jonsson Charlton Methodist Hospital		x	x	x	x	x	x	x	x
143000 Children's Medical Center of Dallas		x		x		x		x	
255000 Methodist Medical Center		x	x	x	x	x	x	x	x
331000 Baylor University Medical Center		x	x	x	x	x	x	x	x
340000 Medical City Dallas Hospital		x	x	x	x	x	x	x	x
431000 Presbyterian Hospital of Dallas		x	x	x	x	x	x	x	x
448000 St Paul Medical Center		x	x	x	x	x	x	x	x
449000 RHD Memorial Medical Center		x	x	x	x	x	x	x	x
474000 Parkland Memorial Hospital		x	x	x	x	x	x	x	x
511000 Doctors Hospital		x	x	x	x	x	x	x	x
544000 Tri-City Health Centre		**							
586000 Baylor Specialty Hospital		x	x	x	x	x	x	x	x
635000 North Dallas Rehabilitation Hospital		x		x^{lv}	x^{N}	x	x^{N}	x	
642000 Baylor Institute for Rehab at Gaston		x	x	x	x	x	x	x	x
653000 Zale Lipshy University Hospital		x	x	x	x	x	x	x	x
661000 IHS Hospital at Dallas		x		x		x		x	
672000 Select Specialty Hospital Dallas		x	x	x		x		x	
683000 HEALTHSOUTH Medical Center		x		x		x		x	
710000 Our Children's House at Baylor		x	x	x	x	x^{lv}	x	x	x
717000 LifeCare Specialty Hospitals of Dallas		x	x	x	x	x	x	x	x
719400 Kindred Hospital White Rock								x	x
752000 Timberlawn Mental Health System		x		x		x		x	
766000 Green Oaks Hospital		x		x		x		x	
810000 Harris Continued Care Hospital		x^{lv}	x	x^{lv}	x	x^{lv}	x	x^{lv}	x
De Leon									
128000 De Leon Hospital		x		x		x		x	
De Soto									
742000 COMPASS Hospital of Dallas closed		x^{lv}							
745000 Charter Haven Behavioral Health System closed		x^{lv}							
779000 The Cedars Hospital		x	x	x	x	x	x	x	x
Decatur									
254000 Decatur Community Hospital		*		*		*		*	
Del Rio									
462000 Val Verde Regional Medical Center		*		*		*		*	
Denison									
191000 Texoma Medical Center		x	x	x	x	x	x	x	x
191001 Reba McEntire Center for Rehabilitation		x	x	x	x	x	x	x	x
191003 Texoma Medical Center Behavioral Health Center	191000								
191004 Texoma Restorative Care Skilled Nursing Unit		x	x	x	x	x	x	x	x
705000 Texoma Medical Center Restorative Care Hospital		x^{lv}	x	x^{lv}	x	x^{lv}	x	x^{lv}	x
Denton									
336000 Flow Rehabilitation Hospital	336001								
336001 Denton Regional Medical Center		x	x	x	x	x	x	x	x
624000 Denton Community Hospital		x		x		x		x^{lv}	
624001 Triad Denton Community Hospital						x		x	

	Reports With	00Q1	With Comment	00Q2	With Comment	00Q3	With Comment	00Q4	With Comment
Denver City									
485000 Yoakum County Hospital		*		*		*		*	
Dimmitt									
260000 Plains Memorial Hospital		*		*		*		*	
Dumas									
199000 Memorial Hospital		*		*		*		*	
Eagle Lake									
560000 Rice Medical Center		*		*		*		*	
Eagle Pass									
547000 Fort Duncan Medical Center		x	x	x	x	x	x		
547001 Fort Duncan Medical Center								x	
Eastland									
222000 Eastland Memorial Hospital		*		*		*		*	
Eden									
202000 Concho County Hospital		*		*		*		*	
Edinburg									
140000 Edinburg Regional Medical Center		x		x		x		x	
140001 UHS Rehabilitation Pavilion	140000								
716600 Cornerstone Rehabilitation Hospital		*		*		*		*	
821000 LifeCare Hospital of South Texas		x	x	x	x	x	x	x	x
830000 Cornerstone Regional Hospital		*		*		*		*	
Edna									
017000 Jackson County Hospital		x*		x*		x*		x*	x^N
El Campo									
426000 El Campo Memorial Hospital		x	x	x	x	x	x	x	x
El Paso									
130000 Providence Memorial Hospital		x	x	x	x	x	x	x	x
180000 Las Palmas Medical Center		x		x		x		x	
252000 Southwestern General Hospital		x		x		**		**	
263000 R. E. Thomason General Hospital		x	x	x	x	x	x	x	x
266000 Sierra Medical Center		x	x	x	x	x	x	x	x
319000 Del Sol Medical Center		x		x		x		x	x
319001 Del Sol Rehabilitation Hospital	319000								
638000 Rio Vista Rehabilitation Hospital		x	x	x	x	x	x	x	
701000 IHS Hospital at El Paso		x		x		x		x	
718001 Highlands Regional Rehabilitation Hospital								x^{lv}	x
724000 Las Palmas Behavioral Center		x		x		x		x	
808000 El Paso Psychiatric Center		x		x		x		x	
Eldorado									
136000 Schleicher County Medical Center		*		*		*		*	
Electra									
490000 Electra Memorial Hospital		*		*		*		*	
Ennis									
285001 Baylor Medical Center Ellis County–Ennis	285000								
714500 Ennis Regional Medical Center				x		x		x	
Fairfield									
401000 East Texas Medical Center–Fairfield		x		x		x		x	
Floresville									
433000 Wilson Memorial Hospital		*		*		*		*	
Fort Stockton									
356000 Pecos County Memorial Hospital		x		x		x		x	
Fort Worth									
047000 Huguley Health Systems		x	x	x		x	x	x	x

	Reports With	00Q1	With Comment	00Q2	With Comment	00Q3	With Comment	00Q4	With Comment
093000 Osteopathic Medical Center of Texas		x		x		x		x	
235000 Harris Methodist Fort Worth		x	x	x	x	x	x	x	x
332000 Cook Children's Medical Center		x	x^N	x	x^N	x	x^N	x	x^N
363000 All Saints Episcopal Hosp Ft Worth		x		x		x		x	
409000 John Peter Smith Hospital		x	x	x	x	x	x	x	x
477000 Plaza Medical Center of Fort Worth		x		x		x		x	
627000 Harris Methodist Southwest		x	x	x	x	x	x	x	x
628000 All Saints Episcopal Hosp Cityview		x		x		x		x	
652000 Harris Continued Care Hospital		x^{lv}	x	x^{lv}	x	x^{lv}		x^{lv}	
657001 Kindred Hospital Fort Worth		x		x		x		x	
659000 HEALTHSOUTH Rehabilitation Hospital		x		x		x		x	
662000 HEALTHSOUTH City View Rehab Hospital		x		x		x		x	
690600 LifeCare Hospital of Fort Worth		x	x	x	x	x	x	x	x
800000 Kindred Hospital Tarrant County		x		x		x		x	
Fredericksburg									
219000 Hill Country Memorial Hospital		*		*		*		*	
Friona									
200000 Parmer County Community Hospital Inc.		*		*		*		*	
Gainesville									
298000 Gainesville Memorial Hospital		*		*		*		*	
Galveston									
000102 University of Texas Medical Branch Hospital		x	x	x		x		x	
247000 Shriners Burns Hospital Galveston		*		*		*		*	
Garland									
027000 Baylor Medical Center at Garland		x	x	x	x	x	x	x	x
359000 Garland Community Hospital		x	x	x	x	x		x	
586001 Baylor Specialty Hospital								x^{lv}	x
Gatesville									
346000 Coryell Memorial Hospital		x		x		x		x	
Georgetown									
080000 Georgetown Hospital		*		*		*		*	
Gilmer									
438001 East Texas Medical Center–Gilmer	438000								
Glen Rose									
059000 Glen Rose Medical Center		*		*		*		*	
Gonzales									
103000 Memorial Hospital		*		*		*		*	
184000 Gonzales Warm Springs Rehab Hospital		x	x	x	x	x		x	
Graham									
094000 Graham General Hospital		*		*		*		*	
Granbury									
424000 Lake Granbury Medical Center		x		x		x		x	
Grand Prairie									
501000 Dallas/Fort Worth Medical Center–Grand Prairie		x		x					
Grand Saline									
138000 Cozby-Germany Hospital		*		*		*		*	
Grapevine									
513000 Baylor Medical Center–Grapevine		x	x	x	x	x	x	x	x
787000 Charter Grapevine Behavioral Health System closed		x^{lv}							
Greenville									
085000 Presbyterian Hospital of Greenville		x		x		x		x	
754000 Glen Oaks Hospital		x		x		x		x	
Groesbeck									

	Reports With	00Q1	With Comment	00Q2	With Comment	00Q3	With Comment	00Q4	With Comment
052000 Limestone Medical Center		*		*		*		*	
Groves									
515000 Doctors Hospital		x		x		x		x	
Hale Center									
232000 Hi-Plains Hospital		*		*		*		*	
Hallettsville									
527000 Lavaca Medical Center		*		*		*		*	
Hamilton									
640000 Hamilton General Hospital		*		*		*		*	
Hamlin									
305000 Hamlin Memorial Hospital		*		*		*		*	
Harlingen									
000103 South Texas Hospital		x		x		x[lv]			
000104 Rio Grande State Center		x	x	x	x	x	x	x	x
400000 Valley Baptist Medical Center		x		x		x		x	
Haskell									
572000 Haskell Memorial Hospital		*		*		*		*	
Hemphill									
522000 Sabine County Hospital		*		*		*		*	
Henderson									
248000 Henderson Memorial Hospital		x	x[N]	x	x[N]	x	x[N]	x	x[N]
Henrietta									
193000 Clay County Memorial Hospital		*		*		*		*	
Hereford									
420000 Hereford Regional Medical Center		*		*		*		*	
Hillsboro									
383000 Hill Regional Hospital		x		x		x		x	
Hondo									
427000 Medina Community Hospital		*		*		*		*	
Houston									
000105 University of Texas M.D. Anderson Cancer Center		x	x	x	x	x	x	x	x
000115 Harris County Psychiatric		x	x	x	x	x	x	x	x
007000 The Woman's Hospital of Texas		x		x		x		x	
015000 CHRISTUS St. Joseph Hospital		x	x	x	x	x	x	x	x
030000 Doctors Hospital–Tidwell		x		x		x		x	
115000 Rosewood Medical Center		x							
117000 Texas Children's Hospital		x		x		x		x	
118000 St Luke's Episcopal Hospital		x	x	x	x	x	x	x	x
119000 Memorial Hermann Southeast Hospital		x	x	x	x	x		x	
124000 The Methodist Hospital		x		x	x	x	x	x	x
157000 Doctors Hospital Parkway		x		x		x		x	
164000 The Institute for Rehabilitation & Research		x		x	x	x	x	x	x
172000 Memorial Hermann Northwest Hospital		x	x	x	x	x		x	
188000 Bellaire Medical Center		x	x	x		x		x	
206000 Select Specialty Hospital–Houston Heights		x		x		x	x	x	
206001 Select Specialty Hospital Houston West		x		x		x		x	
206002 Select Specialty Hospital Houston Medical Center		x	x	x	x	x	x	x	x
229000 Houston Northwest Medical Center		x	x	x	x	x	x	x	x
261000 Houston Community Hospital		x[lv]	x	x	x[N]	x	x[N]	x	
267000 Methodist Diagnostic Hospital		x	x	x		x	x	x	x
302000 Memorial Hermann Memorial City Hospital		x	x	x	x	x		x	
316000 Bayou City Medical Center		x		x		x		x	
316001 Bayou City Medical Center North Campus	316000								

	Reports With	00Q1	With Comment	00Q2	With Comment	00Q3	With Comment	00Q4	With Comment
337000 West Houston Medical Center		x	x	x	x	x	x	x	x
347000 Memorial Hermann Hospital		x	x	x	x	x		x	x
384000 Lyndon B Johnson General Hospital	459000								
390000 Park Plaza Hospital		x		x		x		x	
407000 Memorial Hermann Southwest Hospital		x	x	x	x	x		x	
421000 Spring Branch Medical Center		x		x		x		x	
421001 Spring Branch Rehabilitation Center	421000								
458000 East Houston Regional Medical Center		x		x		x		x	
459000 Ben Taub General Hospital		x	x	x	x	x	x	x	x
459001 Quenton Mease Community Hospital	459000								
460000 Riverside General Hospital		x		x		x		x	
526000 Shriners Hospital For Children		*		*		*		*	
606000 Cypress Fairbanks Medical Center		x		x		x		x	
614000 Casa A Special Hospital		x		x		x			
626000 Memorial Hermann Rehabilitation Hospital		x	x	x		x			
626001 Memorial Hermann Continuing Care Hospital						x		x	
646000 HEALTHSOUTH Houston Rehabilitation Institute		x		x		x		x	x
674000 TOPS Surgical Specialty Hospital		x		x		x		x	
676000 Kindred Hospital Houston		x		x		x		x	
678000 SCCI Hospial–Houston Central		x		x^{lv}		x^{lv}		x^{lv}	
698000 The Specialty Hospital of Houston		x	x	x	x	x	x	x	
706000 Kindred Hospital Houston Northwest		x	x	x	x	x	x	x	
712500 Beacon Health Westchase		x^{lv}		x^{lv}		x^{lv}		x^{lv}	
713400 Triumph Hospital North Houston		x^{lv}		x^{lv}		x^{lv}		x	
715000 IHS Hospital at Houston		x	x	x		x		x	
722200 The Neuropsychiatric Center of MHMRA		*		*		*		*	
724300 Memorial Hermann Continuing Care Hospital Southwest								x^{lv}	
730000 Memorial Hermann Behavioral Health Center		x							
735000 TIRR LifeBridge		x		x	x	x	x	x	x
744000 Cypress Creek Hospital		x		x		x		x	x
755000 West Oaks Hospital		x		x		x		x	
758000 HEALTHSOUTH Hospital for Specialized Surgery		x		x^{lv}		x^{lv}		x^{lv}	
762000 IntraCare Medical Center Hospital		x		x		x		x	
763000 Plaza Specialty Hospital		x		x		x		x	
782000 Intracare North Hospital		x		x		x		x	
792000 Texas Orthopedic Hospital		x	x^{N}	x	x^{N}	x	x^{N}	x	x^{N}
807000 Dubuis Hospital of Houston		x	x	x	x	x^{lv}	x	x	x
Humble									
251000 Northeast Medical Center Hospital		x		x		x		x	
616000 HEALTHSOUTH Rehab Hospital		x	x	x	x	x	x	x	x
Hunt									
325000 La Hacienda Treatment Center		*		*		*		*	
Huntsville									
061000 Huntsville Memorial Hospital		x		x		x		x	
Iraan									
258000 Pecos County General Hospital		x^{lv}	x	x^{lv}		x^{lv}		x^{lv}	
Irving									
300000 Baylor Medical Center at Irving		x	x	x	x	x	x	x	x
300001 Baylor Health Center at Irving–Coppell								x	x
814000 Las Colinas Medical Center		x	x	x	x	x	x	x	x
Jacksboro									
046000 Faith Community Hospital		*		*		*		*	
Jacksonville									

	Reports With	00Q1	With Comment	00Q2	With Comment	00Q3	With Comment	00Q4	With Comment
416000 East Texas Medical Center–Jacksonville		x		x		x		x	
Jasper									
038000 CHRISTUS Jasper Memorial Hospital		x		x		x	x	x	
Jourdanton									
334000 South Texas Regional Medical Center		*		*		*		*	
Junction									
205000 Kimble Hospital		*		*		*		*	
Katy									
534001 Memorial Hermann Katy Hospital		x	x	x	x	x	x	x	
715900 CHRISTUS St Catherine Health & Wellness Center				x	x	x	x	x	x
Kaufman									
303000 Presbyterian Hospital of Kaufman		x	x	x	x	x	x	x	x
Kenedy									
357000 Otto Kaiser Memorial Hospital		*		*		*		*	
Kermit									
062000 Winkler County Memorial Hospital		*		*		*		*	
Kerrville									
000106 Kerrville State Hospital		x	x	x	x	x	x	x	x
406000 Sid Peterson Memorial Hospital		x		x		x		x	
Kilgore									
031000 Roy H Laird Memorial Hospital		*		*		*		*	
Killeen									
397001 Metroplex Hospital		x		x		x		x	
397002 Metroplex Pavilion	397000								
Kingsville									
216000 CHRISTUS Spohn Hospital Kleberg		x		x		x		x	
Kingwood									
675000 Columbia Kingwood Medical Center		x		x	x	x	x	x	x
733000 Charter Behavioral Health System of Kingwood closed		x[lv]							
Knox City									
568000 Knox County Hospital		*		*		*		*	
La Grange									
269000 Fayette Memorial Hospital		*		*		*		*	
Lake Jackson									
436000 Brazosport Memorial Hospital		x		x		x	x	x	x
Lamesa									
341000 Medical Arts Hospital		*		*		*		*	
Lampasas									
397000 Rollins-Brooks Community Hospital		x		x		x		x	
Lancaster									
603000 Medical Center at Lancaster		x		x		x		x	
603001 Medical Center of Lancaster								x	
Laredo									
207000 Mercy Health Center		x	x	x		x		x	
301000 Doctors Hospital Laredo		x		x		x		x	
League City									
718000 Devereux Texas Treatment Network		x		x		x		x	x
Levelland									
307000 Covenant Hospital Levelland		x		x		x		x	
Lewisville									
394000 Medical Center of Lewisville		x	x	x	x	x	x	x	x
Liberty									
089000 Liberty-Dayton Hospital		x		x		x		x	

	Reports With	00Q1	With Comment	00Q2	With Comment	00Q3	With Comment	00Q4	With Comment
Linden									
354000 Linden Municipal Hospital		*		*		*		*	
Littlefield									
217000 Lamb Healthcare Center		*		*		*		*	
Livingston									
466000 Memorial Medical Center–Livingston		x	x	x	x	x	x	x	x
Llano									
476000 Llano Memorial Hospital		*		*		*		*	
Lockney									
010000 W.J. Mangold Memorial Hospital		*		*		*		*	
Longview									
029000 Good Shepherd Medical Center		x	x	x	x	x	x	x	x
525000 Longview Regional Medical Center		x		x		x		x	
525001 Longview Regional Physical Rehabilitation	525000								
732000 Meadow Pines Hospital		x		x		x		x^{lv}	
Lubbock									
013000 Highland Medical Center		x		x	x	x	x	x	
109000 Covenant Medical Center Lakeside		x	x	x	x	x	x	x	x
145000 University Medical Center		x	x	x	x	x	x	x	
465000 Covenant Medical Center		x	x	x	x	x	x	x	x
686000 Covenant Children's Hospital		x	x	x	x	x	x	x	x
761000 Charter Plains Behavioral Health System closed		x^{lv}							
786000 IHS Hospital of Lubbock		x		x^{lv}	x^{N}	x		x	
804000 Sunrise Canyon		x		x		x		x	
Lufkin									
129000 Memorial Medical Center East Texas		x	x	x	x	x		x	
481000 Woodland Heights Medical Center		x	x	x		x		x	
691000 Memorial Specialty Hospital		x^{lv}	x	x^{lv}	x	x^{lv}		x^{lv}	
Luling									
597000 Daughters of Charity Seton Edgar B. Davis		x	x	x	x	x		x	
Madisonville									
041000 Madison St. Joseph Health Center		x	x	x	x	x	x	x	x
Mansfield									
657000 Vencor Hospital Mansfield		x^{lv}		x^{lv}					
Marlin									
517000 Falls Community Hospital and Clinic		*		*		*		*	
Marshall									
020000 Marshall Regional Medical Center		x		x		x		x	
McAllen									
601000 Rio Grande Regional Hospital		x	x	x	x	x		x	x
620000 McAllen Medical Center		x		x		x		x	
757000 Charter Palms Behavioral Health System closed		x^{lv}							
802000 McAllen Heart Hospital		x	x	x		x		x	
802000 McAllen Heart Hospital	802001								
827000 Rio Grande Rehabilitation Hospital		x	x	x		x^{lv}			
McCamey									
240000 McCamey Hospital		*		*		*		*	
McKinney									
246000 North Central Medical Center		x		x		x		x	
246001 North Central Medical Center–Wysong Campus	246000								
Memphis									
101000 Hall County Hospital		*		*		*		*	

	Reports With	00Q1	With Comment	00Q2	With Comment	00Q3	With Comment	00Q4	With Comment
Mesquite									
198000 The Medical Center of Mesquite		x		x		x		x	
315000 Mesquite Community Hospital		x	x^N	x					
315001 Mesquite Community Hospital						x	x^N	x	x^N
Mexia									
505000 Parkview Regional Hospital		x	x	x	x	x	x	x	x
Midland									
434000 Westwood Medical Center		x		x		x		x	
452000 Midland Memorial Hospital		x	x^N	x	x^N	x	x^N	x	x^N
452001 Memorial Rehabilitation Hospital	452000								
693000 HEALTHSOUTH Rehab Hospital of Midland/Odessa		x		x		x		x	
741000 Desert Springs Medical Center		x		x		x		x	
Mineral Wells									
034000 Palo Pinto General Hospital		*		*		*		*	
Mission									
370000 Mission Hospital		x		x		x		x	
Missouri City									
609001 Memorial Hermann Fort Bend Hospital		x	x	x	x	x	x	x	x
Monahans									
468000 Ward Memorial Hospital		*		*		*		*	
Morton									
159000 Cochran Memorial Hospital		*		*		*		*	
Mount Pleasant									
137000 Titus County Memorial Hospital		x*		x*		*		*	
Mount Pleasant									
137000 Titus County Memorial Hospital									
Mount Vernon									
282000 East Texas Medical Center Mount Vernon		x		x		x		x	
Muenster									
365000 Muenster Memorial Hospital		*		*		*		*	
Muleshoe									
631000 Muleshoe Area Medical Center		*		*		*		*	
Nacogdoches									
392000 Nacogdoches Medical Center		x	x	x	x	x	x	x	x
478000 Nacogdoches Memorial Hospital		x	x	x	x	x	x	x	x
Nassau Bay									
600000 CHRISTUS St John Hospital		x	x	x	x	x	x	x	x
Navasota									
002000 Grimes St Joseph Health Center	002001								
Nederland									
227001 Mid Jefferson Hospital		x		x		x		x	
New Boston									
632000 Doctors Hospital		*		*		*		*	
New Braunfels									
415000 McKenna Memorial Hospital		x		x		x		x	
Nocona									
348000 Nocona General Hospital		*		*		*		*	
Odessa									
181000 Medical Center Hospital		x	x	x	x	x	x	x	x
425000 Odessa Regional Hospital		x		x		x		x	
Olney									
294000 Hamilton Hospital		*		*		*		*	
Orange									

	Reports With	00Q1	With Comment	00Q2	With Comment	00Q3	With Comment	00Q4	With Comment
121000 Memorial Hermann Baptist Orange Hospital		x	x	x	x	x	x	x	x
Palacios									
574000 Wagner General Hospital		x^{lv}	x	x^{lv}		x^{lv}		x^{lv}	x
Palestine									
377001 Palestine Regional Rehabilitation Hospital		x		x		x		x	
629001 Palestine Regional Medical Center		x		x		x		x	
Pampa									
555000 Pampa Regional Medical Center		x		x		x		x	
Paris									
095000 CHRISTUS St Josephs Health System		x	x	x	x	x	x	x	x
125000 McCuistion Regional Medical Center		x		x		x		x	
Pasadena									
349000 Bayshore Medical Center		x		x		x		x	
694100 Vista Medical Center Hospital		x	x	x	x	x	x	x	
801000 Kindred Hospital Bay Area		x	x	x	x	x	x	x	x
Pearsall									
441000 Frio Regional Hospital		*		*		*		*	
Pecos									
367000 Reeves County Hospital		x*		x*		x*		x*	
Perryton									
098000 Ochiltree General Hospital		*		*		*		*	
Pittsburg									
438000 East Texas Medical Center–Pittsburg		x		x		x		x	
Plainview									
146000 Covenant Hospital Plainview		x	x	x	x	x	x	x	x
Plano									
214000 Medical Center of Plano		x	x	x	x	x	x	x	x
664000 Presbyterian Hospital of Plano		x	x	x	x	x	x	x	x
670000 HEALTHSOUTH Plano Rehabilitation Hospital		x		x		x		x	
720000 Seay Behavioral Health Center								x	x
805000 IHS Hospital at Plano		x	x	x	x	x		x	
Port Arthur									
299000 CHRISTUS St. Mary Hospital		x		x		x		x	
464001 Park Place Medical Center		x		x		x		x	
708001 Dubuis Hospital of Port Arthur		x^{lv}	x	x^{lv}	x	x^{lv}	x	x^{lv}	x
Port Lavaca									
487000 Memorial Medical Center		*		*		*		*	
Quanah									
102000 Hardeman County Memorial Hospital		*		*		*		*	
Quitman									
411000 East Texas Medical Center–Quitman		x		x		x		x	
Rankin									
290000 Rankin County Hospital District		*		*		*		*	
Refugio									
368000 Refugio Memorial Hospital		*		*		*		*	
Richardson									
549000 Baylor/Richardson Medical Center		x	x	x	x	x	x	x	x
Richland Hills									
437000 North Hills Hospital		x		x		x		x	
Richmond									
230000 Polly Ryon Hospital Authority		x		x		x		x	
Rio Grande City									
393000 Starr County Memorial Hospital		*		*		*		*	

	Reports With	00Q1	With Comment	00Q2	With Comment	00Q3	With Comment	00Q4	With Comment
Rockdale									
369000 Richards Memorial Hospital		*		*		*		*	
Rotan									
355000 Fisher County Hospital District		*		*		*		*	
Round Rock									
608000 Round Rock Medical Center		x		x		x		x	
Rowlett									
625000 Lake Pointe Medical Center		x	x[N]	x		x		x	
Rusk									
000107 Rusk State Hospital		x	x	x	x	x	x	x	x
San Angelo									
056000 San Angelo Community Medical Center		x		x		x		x	
104000 Baptist Memorials Center		x[lv]		x[lv]		x[lv]		x[lv]	
168000 Shannon West Texas Memorial Hospital		x	x	x	x	x		x	
445000 Shannon Medical Center St Johns Campus		x	x	x	x	x		x	
747000 River Crest Hospital		x		x		x		x	
819000 SCCI Hospital–San Angelo		x	x	x	x	x	x	x	x
San Antonio									
000108 Texas Center for Infectious Disease		x[lv]	x	x[lv]	x	x[lv]	x	x[lv]	
000110 San Antonio State Hospital		x	x	x	x	x	x	x	x
067000 Methodist Specialty and Transplant Hospital		x		x		x		x	
081000 Southeast Baptist Hospital		x		x		x		x	x
114000 Baptist Medical Center		x		x		x		x	x[N]
134000 Northeast Baptist Hospital		x		x		x		x	x
154000 Southwest Texas Methodist Hospital		x		x		x		x	
158000 University Hospital		x		x	x	x	x	x	x
228000 Southwest General Hospital		x	x	x		x			
283000 Metropolitan Methodist Hospital		x		x		x		x	
339000 CHRISTUS Santa Rosa Hospital		x		x		x		x	
396000 Nix Health Care System		x	x	x	x	x	x	x	x
396001 Nix Specialty Health Center	396000								
503000 St Luke's Baptist Hospital		x		x		x		x	x
618000 Northeast Methodist Hospital		x		x		x		x	
621000 CHRISTUS Santa Rosa Medical Center and Santa Rosa Rehab		x	x	x		x		x	
634000 CHRISTUS Santa Rosa Children's Hospital		x		x		x		x	
636000 HEALTHSOUTH Rehab Institute of San Antonio		x		x		x		x	
643000 San Antonio Warm Springs Rehabilitation Hospital		x		x		x		x	
645000 Kindred Hospital San Antonio		x		x		x		x	
677000 North Central Baptist Hospital		x		x		x		x	x
681000 Methodist Ambulatory Surgery Hospital–Northwest		x		x		x		x	
702000 IHS Hospital at San Antonio		x		x		x		x	
711000 The COMPASS Hospital of San Antonio		x	x	x	x	x		x	
719300 Select Specialty Hospital–San Antonio						x[lv]	x	x[lv]	
723000 Laurel Ridge A Brown Schools Psychiatric Hospital		x		x		x		x	
737000 Southwest Mental Health Center		x	x	x	x	x	x	x	x
751000 Mission Vista Hospital		x		x	x	x		x	
756001 Covenant Behavioral Health		x[lv]		x					
815000 LifeCare Hospital of San Antonio		x		x		x		x	
824000 HEALTHSOUTH Integrated Medical Plaza of Pecan Valley		x[lv]		x[lv]		x[lv]		x[lv]	
San Augustine									
072000 Memorial Medical Center–San Augustine		x	x	x	x	x	x	x	
San Benito									
245000 Dolly Vinsant Memorial Hospital		x		x		x		x	

	Reports With	00Q1	With Comment	00Q2	With Comment	00Q3	With Comment	00Q4	With Comment
245001 Dolly Vinsant Memorial Hospital								x	
San Marcos									
556000 Central Texas Medical Center		x		x		x		x	x
753000 San Marcos Treatment Center		x^{lv}	x	x	x				
Seguin									
155000 Guadalupe Valley Hospital		*		*		*		*	
Seminole									
113000 Memorial Hospital		*		*		*		*	
Seymour									
546000 Seymour Hospital		*		*		*		*	
Shamrock									
571000 Shamrock General Hospital		*		*		*		*	
Sherman									
191002 Texoma Medical Center Behavioral Health Center		x	x	x	x	x	x	x	x
297000 Wilson N Jones Memorial Hospital		x		x		x		x	
402000 Community Medical Center of Sherman		x		x		x		x	
Smithville									
385000 Smithville Regional Hospital		*		*		*		*	
Snyder									
439000 D M Cogdell Memorial Hospital		x*	x^{N}	*		*		*	
Sonora									
147000 Lillian M Hudspeth Memorial Hospital		*		*		*		*	
Spearman									
395000 Hansford County Hospital		*		*		*		*	
Stamford									
043000 Stamford Memorial Hospital		*		*		*		*	
Stanton									
388000 Martin County Hospital District		*		*		*		*	
Stephenville									
256000 Harris Methodist Erath County		x		x		x		x	
Sugar Land									
823000 Methodist Health Center–Sugar Land		x	x	x	x	x	x	x	x
Sulphur Springs									
280000 Hopkins County Memorial Hospital		*		*		*		*	
Sweeny									
178000 Sweeny Community Hospital		x		x^{lv}		x			
Sweetwater									
471000 Rolling Plains Memorial Hospital		*		*		*		*	
Tahoka									
192000 Lynn County Hospital District		*		*		*		*	
Taylor									
044000 Johns Community Hospital		*		*		*		*	
Temple									
186000 Kings Daughters Hospital		x		x		x		x	
537000 Scott & White Memorial Hospital		x	x^{N}	x	x^{N}	x	x^{N}	x	x^{N}
537001 Scott & White Santa Fe Center	537000								
Terrell									
000111 Terrell State Hospital		x	x	x	x	x	x	x	x
512000 Medical Center at Terrell		x		x		x		x	
512001 Medical Center at Terrell–North Campus	512000								
Texarkana									
144000 Wadley Regional Medical Center		x		x		x		x	
144001 Wadley Regional Medical Center SNF		x		x		x		x	

	Reports With	00Q1	With Comment	00Q2	With Comment	00Q3	With Comment	00Q4	With Comment
684000 HEALTHSOUTH Rehab Hospital of Texarkana		x	x	x	x	x	x	x	x
713000 CHRISTUS St Michael Rehab Hospital		x	x	x		x	x	x	x
788000 CHRISTUS St Michael Health System		x	x	x		x	x	x	x
822000 Dubuis Hospital of Texarkana		x	x	x	x	x	x	x	x
Texas City									
793000 Mainland Medical Center		x		x		x		x	
The Woodlands									
615000 Memorial Hermann The Woodlands Hospital		x	x	x	x	x		x	
795000 Beacon Health Woodlands		x^{lv}		x^{lv}		x^{lv}		x^{lv}	
Throckmorton									
428000 Throckmorton County Memorial Hospital		*		*		*		*	
Tomball									
076000 Tomball Regional Hospital		x	x^{N}	x	x^{N}	x	x^{N}	x	x^{N}
Trinity									
287000 East Texas Medical Center–Trinity		x		x		x		x	
Tulia									
273000 Swisher Memorial Hospital		x^{lv}*	x^{N}	*		*		*	
Tyler									
000112 University of Texas Health Center Tyler		x		x		x		x	
286000 Mother Frances Hospital		x		x		x		x	
345000 Doctors Memorial Hospital		x		x					
410000 East Texas Medical Center		x		x		x		x	
410001 East Texas Medical Center Behavioral Health Center	410000								
692000 HEALTHSOUTH Rehab Hospital of Tyler		x	x	x	x	x	x	x	x
777000 East Texas Medical Center Specialty Hospital		x		x		x		x	
799000 East Texas Medical Center Rehab Hospital		x		x		x		x	
Uvalde									
063000 Uvalde Memorial Hospital		*		*		*		*	
Van Horn									
139000 Culberson Hospital		*		*		*		*	
Vernon									
000113 N TX State Hospital Vernon		x	x	x	x	x	x	x	x
084000 Wilbarger General Hospital		*		*		*		*	
Victoria									
064000 Citizens Medical Center		x		x		x		x	
453000 DeTar Hospital Navarro		x	x	x	x	x	x	x	x
453001 DeTar Hospital North								x	x
611000 Regional Medical Center		x	x	x	x	x	x		
611001 Victoria Regional North	611000								
812000 SCCI Hospital of Victoria		x^{lv}		x^{lv}		x		x	
831000 Victoria Warm Springs Rehabilitation Hospital		x		x		x		x	
Waco									
000117 Waco Center for Youth						x^{lv}	x	x^{lv}	x
040000 Providence Health Center		x	x	x	x	x	x	x	x
506000 Hillcrest Baptist Medical Center		x		x		x		x	
736000 DePaul Center–Division of Providence Health Center		x	x	x	x	x		x	
Waxahachie									
285000 Baylor Medical Center–Ellis County		x	x	x	x	x	x	x	x
243000 Campbell Health System		x		x		x		x	
Webster									
212000 Clear Lake Regional Medical Center		x		x		x		x	
680000 HEALTHSOUTH Clear Lake Rehab Hospital		x		x		x		x	
698001 Specialty Hospital Houston–Clear Lake Campus		x	x	x	x	x	x	x	

	Reports With	00Q1	With Comment	00Q2	With Comment	00Q3	With Comment	00Q4	With Comment
Weimar									
005000 Colorado-Fayette Medical Center		*		*		*		*	
Wellington									
195000 Collingsworth General Hospital		*		*		*		*	
Weslaco									
480000 Knapp Medical Center		x	x	x	x	x	x	x	x
West									
196000 Hillcrest Medical Center at West		x		x^{lv}		x^{lv}		x	
Wharton									
111000 Gulf Coast Medical Center		x		x		x		x	
Wheeler									
116000 Parkview Hospital		*		*		*		*	
Whitney									
161000 Lake Whitney Medical Center		*		*		*		*	
Wichita Falls									
000114 North Texas State Hospital–Wichita Falls		x	x	x	x	x	x	x	x
417000 United Regional Health Care System–8th St Campus		x	x	x	x	x	x	x	x
417001 United Regional Health Care System–11th St Campus								x	x
681400 Kell West Regional Hospital		x	x	x	x	x	x	x	x
685000 HEALTHSOUTH Rehab Hospital of Wichita Falls		x		x		x		x	
709000 Red River Hospital		x	x	x	x	x	x	x	x
820000 IHS Hospital of Wichita Falls		x		x		x^{N}		x	
825000 Red River Pavilion	709000								
Winnie									
579000 Medical Center of Winnie closed		**							
Winnsboro									
446000 Presbyterian Hospital of Winnsboro		x	x	x	x	x	x	x	x
Winters									
151000 North Runnels Hospital		*		*		*		*	
Woodville									
569000 Tyler County Hospital		x	x	x	x	x		x	
Yoakum									
023000 Yoakum Community Hospital				x		x		x	
Total hospitals		537		530		529		534	
Total expected to report		415		406		404		409	
Total not in compliance		2		0		1		1	
Total reporting		413		406		403		408	

Note: Hospitals that report discharge data with another hospital are so indicated in the 'Reports With' column.

[*] Exempt hospital. Includes those located in a county with a population less than 35,000, or those located in a county with a population more than 35,000 and with fewer than 100 licensed hospital beds and not located in an area that is delineated as an urbanized area by the United States Bureau of the Census (Section 108.0025). Also includes hospitals that do not seek insurance payment or government reimbursement (Section 108.009).

[**] Not in compliance for this quarter.

[***] No discharges for this quarter.

x^{lv} Hospital with fewer than fifty discharges in the quarter. The hospital IDs for these hospitals has been changed to '999999' in the Public Use Data File, but their comments are listed under their actual THCIC ID. Other changes to the patient records for these hospitals are indicated in the 'Data Dictionary'.

x^{N} Hospital elected not to certify data.